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Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

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State of New Mexico Ex. 189, Minerals and Natural Resources Department Form C-104 Revised 1-1-89 See Instructions

## OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

AGGress Address (Free Proper Box)  New Well Change in Transporter of Change in Transporter of Change in Operator   Change in Transporter of Change in Operator   Change in Operat	Operator		10 1712	1110				T	Well A				
Martin   Mobble   Motor   Mobble   Motor   M	•	NY							30-	025-117	68 <del></del>		
Dobe (Please explain)   Dobe (Please explain)	Address												
Change in Operator Change in Ope	BOX 1710, HOBBS, NEW M	EXICO _	88240	)									
Colonge is Operator give name   Calainghead Gas   Coodennie   EFFECTIVE:	Reason(s) for Filing (Check proper box)					Out	et (Please expl	ain)					
Casinghead Gas E Condenses Casinghead Gas E Condenses Casinghead Gas E Condenses Casing Green of previous operators  In DESCRIPTION OF WELL AND LEASE  Lase Name  Val No. Pool Name, Including Formation  CARLSON EDDERAL.  Contains  CARLSON EDDERAL.  Contains  South Line and 2309 Feet From The WEST Line  Section 25 Township 25S Range 37E NoMPM, LEA County  III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  Name of Authoritied Transprint of 20 D O Condenses P. O. Box 2528, Hobbs, NN 88240  Name of Authoritied Transprint of 20 D O Condenses P. O. Box 2528, Hobbs, NN 88240  Name of Authoritied Transprint of 20 D O Condenses P. O. Box 2528, Hobbs, NN 88240  Name of Authoritied Transprint of 20 D O Condenses P. O. Box 2528, Hobbs, NN 88240  Name of Authoritied Transprint of Casin Transprint of 20 D O Condenses P. O. Box 2528, Hobbs, NN 88240  Name of Authoritied Transprint of Casin Transprint of 20 D O Condenses P. O. Box 2528, Hobbs, NN 88240  Name of Authoritied Transprint of Casin Transprint Casin Transprint Transprint of Casin Transprint Casin Trans	New Well								, .	,			
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DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS   Name of Authorized Transporter of Oil	Section 25 Township	25	S	Ran	ge 371	E , N	MPM,		LEA	<b>L</b>		County	
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Texas New Mexico Pipeline Co.  Name of Authorized Transporter of Casinghead Gas   X   or Dry Gas   Address (Give address to which approved copy of this form is to be sent)  Sid Richardson Carbon & Gasoline Co.  P. O. Box 12528, Hobbs, NM 88232  If well produces oil or liquid, purpose of this form any other less or pool, pive corromingling order sumber:  V. COMPLETION DATA SID PICHARDSON GASOLINE CO Eff. 3/1/93  Total production is commingled with that from any other less or pool, pive corromingling order sumber:  V. COMPLETION DATA SID PICHARDSON GASOLINE CO Eff. 3/1/93  Designate Type of Completion - (X) Oil Well   Gas Well   New Well   Workover   Deepen   Plug Back   Same Reav   Diff Resv    Designate Type of Completion - (X) Oil Well   Gas Well   New Well   Workover   Deepen   Plug Back   Same Reav   Diff Resv    Designate Type of Completion - (X)   Diac Compl. Ready to Prod.   Total Depth   P.B.T.D.    Diac Spudded   Date Compl. Ready to Prod.   Total Depth   P.B.T.D.    Diac Spudded   Date Compl. Ready to Prod.   Total Depth   P.B.T.D.    Ferforations   Depth Casing Shoe    TUBING, CASING AND CEMENTING RECORD    HOLE SIZE   CASING & TUBING SIZE   DEPTH SET   SACKS CEMENT    V. TEST DATA AND REQUEST FOR ALLOWABLE    OIL WELL   Get must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for fall 24 hones.)  Producing Method (Flow, pump, gas 16f. etc.)    Casing Pressure   Choke Size    OIL WELL   Gas-MCF   Cravity of Condensate    Casing Pressure   Choke Size    OIL CONSERVATION DIVISION    Date Approved    By ONIGERSO MERITARY SCHOOL SCHOOL    Date Approved    By ONIGERSO MERITARY SCHOOL SCHOOL    Title   Title    Title		SPORTE			ND NATU	RAL GAS				-California	· / K	1	
Name of Authorized Transporter of Casingheed Gas  Sid Richardson Carbon & Gasoline Co.  P. O. Box 1226, Jal., NM 88252  Yes]  When T well produces of triguids,  Twell produces in committing de with that from any other lease or pool, give committing order number:  IV. COMPLETION DATA SID PICHARDSON GASOLINE CO Eff. 3/1/93  Designate Type of Completion - (X)  Oil Well Gas Well New Well Workover Desepts Plug Back Same Reav Diff Reav Date Spudded  Date Compl. Ready to Prod.  Total Depth P.B.T.D.  Designate Type of Completion - (X)  IV. COMPLETION DATA SID PICHARDSON GASOLINE CO Eff. 3/1/93  Designate Type of Completion - (X)  IV. COMPLETION DATA SID PICHARDSON GASOLINE CO Eff. 3/1/93  Designate Type of Completion - (X)  IV. COMPLETION DATA SID PICHARDSON GASOLINE CO Eff. 3/1/93  Designate Type of Completion - (X)  IV. COMPLETION DATA SID PICHARDSON GASOLINE CO Eff. 3/1/93  Designate Type of Completion - (X)  IV. COMPLETION DATA SID PICHARDSON GASOLINE CO Eff. 3/1/93  Designate Type of Completion - (X)  IV. COMPLETION DATA SID PICHARDSON GASOLINE CO Eff. 3/1/93  Designate Type of Completion - (X)  IV. COMPLETION DATA SID PICHARDSON GASOLINE CO Eff. 3/1/93  Designate Type of Completion - (X)  IV. TEST DATA AND REQUEST FOR ALLOWABLE  DIL WELL  Get train by differ recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)  Determined Amore  Date of Test  Tubing Pressure  Casing Pressure  Choke Size  Oil - Bibls.  Gas-MCF  Oil CONSERVATION DIVISION  Date Approved  By Ontalison the best on the base of my knowledge and belief.  Take  Title  Title  Title	Name of Authorized Transporter of Oil	$\square$	or Conde	nsale								~)	
Sid Richardson Carbon & Gasoline Co.   P. O. Box 1226, Jal., NM 88252	Texas New Mexico Pipel:	ne Co.				P. U. BOX 2020, HODDS, INT. GOZAU							
If well produces oil or liquids, well produces of trained by the produces of the produces of trained by the produces of trained by the produces of the produces of the produces of the produces of trained by the produces of the produce		head Gas X or Dry Gas				P O Roy 1226. Is1. N				M 8825	M 88252		
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Date Speeded Date Compt. Ready to Prod.  Elevations (DF, RKB, KT, GR, etc.) Name of Producing Formation Top Oil/Gas Pay Tubing Depth  Depth Casing Shoe  TUBING, CASING AND CEMENTING RECORD  HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT  V. TEST DATA AND REQUEST FOR ALLOWABLE DIL WELL (Test must be after recovery of tools wiome of lood oil and must be equal to or exceed top allowable for this depth or be for full 24 knows.)  Date First New Oil Run To Tank Date of Test Producing Method (Flow, pump, gas lift, etc.)  Casing Pressure Choke Size  GAS WELL  Actual Prod. During Test Oil - Bbls. Water - Bbls. Gas-MCF  GAS WELL  Actual Prod. Test - MCF/D Length of Test Bbls. Condensate/MMCF Gravity of Condensate  Toting Method (picot, back pr.) Tubing Pressure (Stut-in)  VI. OPERATOR CERTIFICATE OF COMPLIANCE Interest been compiled with add that the information gives above is true and complete to the best of my knowledge and belief.  Signature  James D. Toghurn, Operations Coordinator Title  Title  Title  Title  Title  Title  Title  Title  Title  Testing Method Name									epen	Plug Back	Same Res'v	Diff Res'v	
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Actual Prod. During Test  Oil - Bbls.  Water - Bbls.  Gas- MCF  Gas- MCF  Gas- MCF  Gravity of Condensate  Choke Size  VI. OPERATOR CERTIFICATE OF COMPLIANCE  I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.  By ORIGINAL THEFT OF COMPLIANCE  Date Approved  By ORIGINAL THEFT OF SERRY SECTION  Title  Title  Title  Title						Casing Pressure				Choke Size	Choke Size		
Actual Prod. During Test  GAS WELL  Actual Prod. Test - MCF/D  Length of Test  Bbls. Condensate/MMCF  Gravity of Condensate  Choke Size  VI. OPERATOR CERTIFICATE OF COMPLIANCE  I hereby certify that the rules and regulations of the Oil Conservation Division have been complete with and that the information given above is true and complete to the best of my knowledge and belief.  Date Approved  By ORIGINAL STREET SORY SECTION  DISTORT A CHEST SECTION  Title  Title  Title  Title	Length of Test	Tubing Pressure				Casing Ficeautic							
GAS WELL  Actual Frod. Test - MCF/D  Length of Test  Bbls. Condensate/MMCF  Gravity of Condensate  Casing Pressure (Shut-in)  Casing Pressure (Shut-in)  Choke Size  VI. OPERATOR CERTIFICATE OF COMPLIANCE  1 hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.  Date Approved  By ORIGINAL SECTION DIVISION  Date Approved  By ORIGINAL SECTION DIVISION  Title  Title  Title  Title	And Daile Test	O'I Phi				Water - Bbis.				Gas- MCF			
Actual Prod. Test - MCF/D  Length of Test  Bbis. Condensate/MMCF  Gravity of Condensate  Casing Pressure (Shut-in)  Casing Pressure (Shut-in)  Choke Size  VI. OPERATOR CERTIFICATE OF COMPLIANCE  1 hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.  Date Approved  Bbis. Condensate/MMCF  Gravity of Condensate  Gravity of Condensate  Choke Size  OIL CONSERVATION DIVISION  Date Approved  By ORIGINAL MODIFIED BY BESTY SEXTONS  DISTURDED BY BESTY SEXTONS  Title  Title  Title	Actual Front During Test	Oil - Bois.											
Actual Prod. Test - MCF/D  Length of Test  Bbis. Condensate/MMCF  Gravity of Condensate  Casing Pressure (Shut-in)  Casing Pressure (Shut-in)  Choke Size  VI. OPERATOR CERTIFICATE OF COMPLIANCE  1 hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.  Date Approved  Bbis. Condensate/MMCF  Gravity of Condensate  Gravity of Condensate  Choke Size  OIL CONSERVATION DIVISION  Date Approved  By ORIGINAL MODIFIED BY BESTY SEXTONS  DISTURDED BY BESTY SEXTONS  Title  Title  Title	C. A TITLE	<u> </u>											
Testing Method (pitot, back pr.)  Tubing Pressure (Shut-in)  Casing Pressure (Shut-in)  Choke Size  VI. OPERATOR CERTIFICATE OF COMPLIANCE  1 hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.  Signature  Tames D. Coghurn. Operations Coordinator Printed Name  Title  Title  Title							Bbls Condensate/MMCF				Gravity of Condensate		
VI. OPERATOR CERTIFICATE OF COMPLIANCE  1 hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.  Signature  Tames D. Coghurn, Operations Coordinator Printed Name  Title  Title  Title  Title  Title	COMMITTION TEST - INCLIN												
VI. OPERATOR CERTIFICATE OF COMPLIANCE  I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.  Date Approved  By ORIGINAL CHOPPENDER  DISTURE I SHIPP PROPE  Title  Title  Title	Testing Method (nites back or )	Tubing Pressure (Shut-in)				Casing Pres	Casing Pressure (Shut-in)				Choke Size		
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.  Date Approved  By ORIGINAL CHARGE BY SERRY SERTION  Finted Name  Title  Title  Title	a married transmittered frames many by A		•	-						<u> </u>			
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.  Date Approved  By ORIGINAL CHARGE BY SERRY SERTION  Finted Name  Title  Title  Title	WI ODED ATOD CEDTIES	ATE OF	COM	pt r	ANCE			= -			00.000		
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.  Date Approved  By ORIGINAL SECTION OF JEST SECTIONS  Title  Title  Title  Title						11	OIL CO	NSE	:RV	АПОЙ	Pililizie	βM	
Date Approved    Date Approved	Division have been complied with and	that the info	armation gi	ven a	bove					ĄĻ	11 63 34	<u> </u>	
Signature  James D. Cogburn, Operations Coordinator  Title  Title  Title  Title	is true and complete to the best of my	mowledge a	nd belief.			Dat	e Approve	ed _					
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Printed Name  Title  Title  Title	Jamil light					Rv	ORIGINAL	<u> </u>	<u>nta 197</u> 2	SERRY SE	EXTON		
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Date Telephone No.   FOR RECORD ONLY. A 2 2 11 10	1/17/92			92-	1600					~ A !!! `			
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INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.

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