Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-104
Revised I-1-89
See Instructions
at Bottom of Page

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

DISTRICT II P.O. Drawer DD, Antesia, NM 88210

REQUEST FOR ALLOWABLE AND AUTHORIZATION

I.	Т	O TRAN	SPORT OIL	AND NA	FURAL GA	NS .				
Operator Communication Communi					Well API No.					
Convest Energy Corporation					30-025-23036					
Address 2401 Fountain View Dr.	, Suite	700, F	Houston, T						· · · · · · · · · · · · · · · · · · ·	
Reason(s) for Filing (Check proper box)		~ . ~		Oth	r (Piease expla	iin)				
New Well		Change in Tra	_							
Recompletion	Oil Coringhand	Gas 🖺 Co								
Change in Operator	Casingnesi		жие							
and address of previous operator					 					
II. DESCRIPTION OF WELL	AND LEA	SE								
Lease Name	-			of Lease No.						
Arnott Ramsay A		5 J	Jalmat T-Y-	SR		State		B-2	229	
Location Unit LetterG	: 198	0 Fe	set From The N	orth Lin	and198	30 Fe	et From The .	East	Line	
Section 2 Township 25S Range 36E NMPM,						Lea County				
III DECICIATION OF TRANS	cdoparer	OFOU	A NIV. NI A TYT II	DAT CAS			· · · · ·			
III. DESIGNATION OF TRANS Name of Authorized Transporter of Oil		or Condensate			e address 10 wh	rich approved	copy of this f	orm is to be se	ni)	
Texaco Trading & Transp	LAI			ı	ox 5568,				•	
Name of Authorized Transporter of Casinghead Gas										
Sid Richardson Carbon &	chardson Carbon & Gasoline Co. 201 Main Street, Fort Worth, TX 76102)2	
If well produces oil or liquids,	•	•	wp. Rge.	· ·			n?			
give location of tanks.	F		25S 36E	Yes		10/	2/69			
If this production is commingled with that f IV. COMPLETION DATA	rom any othe	r lease or poo	ol, give commingi	ing order num	<u></u>		· · · · · · · · · · · · · · · · · · ·		<u> </u>	
	G D	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Designate Type of Completion		<u> </u>	<u> </u>	Total Donah	<u> </u>	<u> </u>	<u></u>	<u> </u>	1	
Date Spudded	Date Compl	. Ready to Pr	rod.	Total Depth			P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Pro	oducing Form	nation	Top Oil/Gas Pay			Tubing Depth			
Perforations	J			1			Depth Casir	ng Shoe	•	
	TI	UBING, C	ASING AND	CEMENTI	NG RECOR	D D	<u> </u>			
HOLE SIZE	CASING & TUBING SIZE			DEPTH SET			SACKS CEMENT			
	<u> </u>									
V. TEST DATA AND REQUES	T FOR A	LLOWAE	BLE	I			1	 		
OIL WELL (Test must be after re				be equal so or	exceed top all	owable for thi	s depth or be	for full 24 hou	rs.)	
Date First New Oil Run To Tank	Date of Test	l		Producing M	ethod (Flow, pi	ump, gas lift, e	etc.)			
Length of Test	Tubing Pres	SIF		Casing Pressure			Choke Size			
	a notage 1 account									
Actual Prod. During Test	Oil - Bbls.			Water - Bbis.			Gas- MCF			
GAS WELL										
Actual Prod. Test - MCF/D	Length of T	est		Bbls. Condensate/MMCF			Gravity of Condensate			
	Tubing Pressure (Shut-in)			Casing Pressure (Shut-in)			Choke Size			
Testing Method (pitot, back pr.)	Tuoing Free	enie (20ni-m		Casing Pressure (Snut-III)			Close Size			
VI. OPERATOR CERTIFIC	ATE OF	COMPL	IANCE							
I hereby certify that the rules and regul					OIL CON	NSERV	ATION	Divisio	NC	
Division have been complied with and that the information given above					OIL CONSERVATION DATISION					
is true and complete to the best of my l	cnowledge an	d belief.		Date	Approve	ed				
Characo A					I					
Signature Signature						rig. Signe Paul Kar	itz.			
Theresa Overturf Engineering Technician					By Paul Kautz Geologist					
Printed Name 10/31/91	(713)	780-195	Title 2	Title		<u> </u>	· · · · · · · · · · · · · · · · · · ·			
10/31/91 Date	(113)		none No.			•	•			
			· · · - ·	H		1				

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.