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 1-1-89 See Instructions at Bottom of Page

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

## OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brazos	Rd., Aziec, NM	87410
---------------------------------	----------------	-------

REQUEST FOR ALLOWABLE AND AUTHORIZATION

Operator	··	10 15	IVIA	-Uni C	AL AND N	ATUHAL (		all ADV by	<del></del>	<del></del>
Tahoe Energy, Inc.							W	api No. 30-025-	25620	
Address 3909 W. Industrial	, Midla	nd, Te	xas	79703				30 023	23029	
Reason(s) for Filing (Check proper box,	)		·····		0	ther (Please ex	plain)	<del></del>		
New Well		Change		porter of:		Effectiv	ie Novo	mhom 1	1001	
Recompletion Change in Operator	Oil	L	ا Dry C			HITCCLIV	e nove	mber 1,	1991	
If change of operator give name	Casingh	ead Gas	X Cond	ensale			·			
and address or previous operator	<del></del>			···	· · · · · · · · · · · · · · · · · · ·					
II. DESCRIPTION OF WELL	AND LI	EASE								
Lease Name		Well No.	Pool I	Vame, Inclu	ding Formation	+ T-V		d of Lease		Lease No.
King-Harrison "C"		11	⊥ <del>La</del>	nglie	Mattix S	R ON CE	3/1	X KANAN XXF	ice	
_		1210								
Unit LetterE	;	2310	_ Feet F	rom The	North Li	ne and $\underline{}$	30	Feet From The	West	Lir
Section 20 Townsh	i <b>p</b> 245	5	Range	37E	. N	ІМРМ,	Tar			_
m begrevitmos en m							Lea		······································	County
III. DESIGNATION OF TRAIN Name of Authorized Transporter of Oil	NSPORTI	ER OF O	IL AN	D NATL	RAL GAS					
		or Conde	DENIE		Address (Gi	ve address to w	hich approv	ed copy of this	form is to be	seni)
Name of Authorized Transporter of Casin Sid Richardson Carb	rbon & Gasoline Co			Gas SZ	Address (Gin	e address to w	hich approve	d copy of this form is to be sent) Worth, Texas 76102		
If well produces oil or liquids	Unit	Sec.	Twp.	Rgc.		y connected?			Texas	76102
ive location of tanks.	<u>i</u>		1	1	_	_	Whe			
this production is commingled with that V. COMPLETION DATA	from any ou	er lease or	pool, giv	e comming	ing order num	ber:		10	-26-77	
	-	Oil Well	10	ias Well	New Well	Workover	I D			
Designate Type of Completion Date Spudded		Ĺ	i		i	, warder	Deepen	Piug Back	Same Res'v	Diff Res'v
Serie Surriced	Date Com	al. Ready to	Prod.		Total Depth	<del></del>		P.B.T.D.	L	L
levations (DF, RKB, RT, GR, etc.)	Name of B	oducing Fo	mantine.		Top Oil/Cont					
·	TABLIS OF F	concing ro	HINNIOO		Top Oil/Gas F	ъу		Tubing Dept	h	· · · · · · · · · · · · · · · · · · ·
erforations	L				···		·	D-th C		
								Depth Casin	g Shoe	
LOUE SIZE	Т	UBING, (	CASIN	G AND	CEMENTIN	G RECORI	)		<del></del>	
HOLE SIZE	HOLE SIZE CASING & TUBING SIZE		ZE		SACKS CEMENT					
										···
TEST DATA AND DECUEO								<del> </del>		
TEST DATA AND REQUEST  IL WELL  Test must be often received.	FOR A	LLOWA	BLE						<del></del>	
IL WELL (Test must be after recate First New Oil Run To Tank	Date of Test	u vocume of	load oil	and musi b	e equal to or e	xceed top allow rod (Flow, pur	able for this	depth or be fo	r full 24 hou	rs.)
				"	sommer with	iou (riow, pum	.p, gas iyi, e	(c.)		
ngth of Test	Tubing Press	ure			asing Pressure	;	<del></del>	Choke Size	<del></del>	
tual Prod. During Test Oil - Bbis.										
					Water - Bbis.			Gas- MCF		
AS WELL						····				
	ength of Te	nt.								
	engar of 16	<b>u</b> .		B	bls. Condensat	e/MMCF		Gravity of Cor	densate	
ing Method (pitot, back pr.)	Tubing Pressure (Shut-in)		c	Casing Pressure (Shut-in)			Choke Size			
				1		(		Choke Size		
OPERATOR CERTIFICA	TE OF C	OMPLI	LANC	E				<del></del>		
hereby certify that the rules and regulation division have been complied with and that	as of the Oil	Conservati	ion		Ol	L CONS	SERVA	TION D	IVISIO	N
true and complete to the best of my kno	wiedge and t	octicf.	MOV¢		_			, i.d. 1884 4	1 4 400	۱4
7. Colleceno		1			Date A	pproved		<u> </u>	11 135	
ignature		<del></del>	<del></del>		p.,	Sometime and				
V A D			ont	By RIGINAL MENED BY JERRY SEXTON						
nied Name Title			E1117	Title						
10/29/91	Ω-	L5/697-	7020	- 11	* 11.17.7					
ALE		Telephor			1106	<del></del>				

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.

OCT 3 1 1991

ons Robbs o**mæ**