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	SANTA FE	NEW MEXICO OIL CONSERVATION COMP ION			Form C-104			
		REQUEST FOR ALLOWABLE			Supersedes Old C-104 and C-1			
	FILE		AND			"CRECE!	VED	
	U.S.G.S.	AUTHORIZATION TO TR	ANSPORT OIL AND N	ATURAL (SAS			
	LAND OFFICE	_		-	1	1881 O 1	10Ad	
	TRANSPORTER OIL	_			of C	JAN 21	1982	
	GAS	-				<i>* * * *</i>	ում	
	OPERATOR	4			· ·	O. C. (
1.	PRORATION OFFICE Operator	<u> </u>			<u>. i. A</u>	RTESIA, OF	FICÉ	
	Florida Exploration Company							
		Address						
	Suite 900 Vaughn Building, Midland, Texas 79701							
	Reason(s) for filing (Check proper bo		Other (Please e	explain)				
	New Well KX	Change in Transporter of:						
	Recompletion	Oil Dry G	F 1					
	Change in Ownership	Casinghead Gas Conde	insate 📗					
	If change of ownership give name							
	nd address of previous owner							
					•			
II.	DESCRIPTION OF WELL AND	Well No. Pool Name, Including F	Formation	ind of Lease				
	Lease Name		1_	-			Lease No.	
	Reno Comm	l Undesigna	ted s	tate, Federa	or ree	Fed	NM 19209	
	Location							
	Unit Letter;	Unit Letter D; 1200 Feet From The north Line and 1200 Feet From The West						
	Line of Section 11 Township 25S Range 35E , NMPM, Lea County							
HI.		TER OF OIL AND NATURAL GA				 		
	Name of Authorized Transporter of Oi.		Address (Give address to				be sent)	
	Western Crude, Inc	P. O. Box 1142, Midland, Texas 79702						
	Name of Authorized Transporter of Ca	-	Address (Give address to which approved copy of this form is to be sent)					
	Natural Gas Pípeli	P. O. Box 283, Houston, Texas 77001						
	If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected?	•				
	give location of tanks.	D 11 25S 35E	Yes		1-4-82	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	
		th that from any other lease or pool,	give commingling order n	umber:				
IV.	COMPLETION DATA	Oil Well Gas Well	Table Survey Live St			76 5 4	15.77.5	
	Designate Type of Completic		New Well Workover	Deepen	Plug Back	Same Rest	v. Diff. Res'v.	
		i	<u> </u>		 	1		
	Date Spudded	Date Compl. Ready to Prod.	Total Depth		P.B.T.D.			
			<u> </u>					
	Elevations (DF, RKB, RT, GR, etc.)	vations (DF, RKB, RT, GR, etc.; Name of Producing Formation Top Oil		op Oll/Gas Pay		Tubing Depth		
		<u> </u>						
	Perforations		Depth Casing Shoe					
		TUBING, CASING, AND						
	HOLE SIZE	CASING & TUBING SIZE	A TUBING SIZE DEPTH SET		SACKS CEMENT			
ļ								
Ì								
Į		1	<u>i</u>					
V.	TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a	fter recovery of total volume	of load oil a	nd must be e	qual to or ex	ceed top allow-	
	OIL WELL able for this deposit of Test Date First New Oil Run To Tanks Date of Test		pth or be for full 24 hours)	1:6	\			
			Producing Method (Flow, pump, gas lift		e, etc./			
	Length of Test	Tubing Pressure	Casing Pressure		Choke Size			
ľ	Actual Prod. During Test	Oil-Bbis.	Water - Bbls.		Gas - MCF			
]					
-			•					
_	GAS WELL		T			·		
ſ	tual Prod. Test-MCF/D Length of Test Bbls. Condensate/MMCF Gravity of Conde				ondensate			
L			Casing Pressure (Shut-in					
Γ	Testing Method (pitot, back pr.)	sting Method (pitot, back pr.) Tubing Pressure (Shut-in)			Choke Size			

Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

I hereby certify that the rules and regulations of the Oil Conservation

Engineering

January 20, 1982

I. CERTIFICATE OF COMPLIANCE

(Title)

Les Clements Oil & Cas Lasp. TITLE _

APPROVED.

This form is to be filed in compliance with RULE 1104.

Orlg. Signed by

OIL CONSERVATION COMMISSION

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for silowable on new and recompleted wells. Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

(Date)