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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, Artesia, NM 88210

## 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

I.	neQ(	TO TRA	UH A NSF	ALLOWA PORT O	IL AND N		HOR	IZATIO	NC					
Operator Westbrook Oil	Corpor	iation		<u> </u>	IL AND IV	IX I OF	TAL G		Well /	API No.				
Address										30-	025-	0970	8	
P.O. Box 2264  Reason(s) for Filing (Check proper box)	<u> - ново</u>	os, NM	88:	241-226										
New Well		Change in	Transp	porter of:		Other (Pi	ease expl	lain)						
Recompletion	Oil		Dry C	ias 🔲	E	LLec	tive	Docon	nhar	1, 19	03			
If change of operator give name	Casinghea		Conde							. 1, 17	73			
and address of previous operator	H. West	<u>brook</u>	<u>- P(</u>	) Box 2	?264 - H	obbs.	, NM	8824	0					
II. DESCRIPTION OF WELL Lease Name	AND LEA		T										· · · · · · · · · · · · · · · · · · ·	
State "w"		Well No.	Pool 1 Jal	Name, Inclu Emat Ta	ding Formationsill y	ates	7-Ru			of Lease Federal or F			ease No.	
Location	.,	//						<u> </u>		- COCIET OF I	-	B-14	84	
Unit Letter0			Feet F	rom The _	South L	ine and	1	9.80	_ Fe	t From The		East	<u>.</u>	Line
Section 36 Townshi	p 24.	<u>s</u>	Range	36	E	NMPM,			Le	а				
III. DESIGNATION OF TRAN Name of Authorized Transporter of Oil	SPORTE	R OF O	T. A.	Л Матч	IDAT GA	,							Coun	ly
				DIVATO	Address (G	ive addr	ess to wi	hick appr	oued.	copy of this	<u> </u>			
Texaco Trading & Trans Name of Authorized Transporter of Casin	portatio				1.0.	BUX	رەטدد	, r.A		venve	r CO	802	17-54	568
<u>Sid Richardson Gasolini</u>	<b>mesa Gas</b> e. Compai	N.U.	or Dry	Gas	Address (G	ive addr	ess to wh	ich appr	oved .	come of this	form	4-1	น)	
If well produces oil or liquids, give location of tanks.	Unit		Twp. 24.	S 36E		nach	SULLE	<u>u -</u>	hen :	t worth	1 TX	761	02	
	0	26	24.	S 36E	1				vnen :	,				
If this production is commingled with that IV. COMPLETION DATA	HOIR MAY OUNG	er lease or p	ool, gi	ve comming	ding order nur	nber:								
Designate Type of Completion	- (X)	Oil Well	1	Gas Well	New Wel	Wor	kover	Deep	en l	Plug Back	lcom.	Dark	bier n	
Date Spudded	Date Compl	l. Ready to	Prod		Total Depth	ı			i	- Ing Dack	Joanne	Kes V	Diff Re	\$'V
Elevations (DE DVD DE CO					Total Depth	l				P.B.T.D.	<del></del>		<u> </u>	
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation					Top Oil/Gas Pay					Tubing Depth				
Perforations	l									_				
										Depth Casin	g Shoe			
HOLE SIZE	<u>T</u>	UBING, (	CASI	NG AND	CEMENT	ING R	ECORI	<u> </u>			<del></del>			
	CAS	ING & TU	BING S	SIZE	<del> </del>		H SET				SACKS	CEME	NT	
												<del></del>		
TEST DATA AND REQUES	T FOR AI	LLOWA	BLE		<u> </u>									
Test must be after re	covery of total	il volume oj	f load o	oil and must	be equal to o	r exceed	top allov	wable for	this d	ienth or he i	for full	24 hours	. 1	
- Note to lank	Date of Test				Producing M	lethod (F	low, pun	np, gas li	ft, etc	.)		LY NOWS	.)	
ength of Test	of Test Tubing Pressure			·	Casing Pressure					Choke Size				
Actual Prod. During Test	Oil Dit									CHOKE SIZE				
	Oil - Bbls.				Water - Bbis				-	Gas- MCF				
GAS WELL								·	i				<del></del> -	
Actual Prod. Test - MCF/D	Length of Te	श्च			Bbls. Conder	sate/MN	<b>ICF</b>			Gravity of C	ondens	210		
esting Method (pitot, back pr.)	Tubing Press	ure (Shut-ir							İ		OE GC 119	acc		
					Casing Press	ure (Shu	t-in)		(	hoke Size				
I. OPERATOR CERTIFICA	TE OF	COMPL	JAN	CE	<u>                                     </u>	<u> </u>								
I hereby certify that the rules and regulat Division have been complied with and th is true and complete to the best of my kn	ions of the O	il Conserva	. 4			OIL (	CON	SER'	VA <sup>·</sup>	I NOIT	DIVI	SIOI	N	
1, 1	/	1 /			Date	App:	roved	DEC	<u>`                                    </u>	7 1902				
V. A. Westmort					Date Approved BEC 0.7 1993 ORIGINAL SIGNED BY JERRY SEXTON					-				
Signature V.H. Westbrook	k V.	ice-Pr	esid	!ent	By_		DIS	TRICT	I SU	PERVISO	R ———		·	
Printed Name 11/12/93	50:	5-393-	ille 9714		Title						*			
Date		Teleph												

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
- 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.

Submit 5 Copies
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## OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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DISTRICT II
P.O. Drawer DD, Ameria, NM \$8210

REQUEST FOR ALLOWABLE AND AUTHORIZATION

	TOTRA	NSPORT OIL	AND NAT	URAL GA						
Operator			Well AF							
V.H. Westbrook - Oil		30-025-09708								
Address	D 2264 II-	- ኤኤ እፕአ/ Of	2240							
808 W. Broadway, P.O.	BOX 2204, HC	אטטט, אייי איי	3240 Outre	t (Piease expia	in)					
leason(s) for Filing (Check proper box)	Change in	Transporter of:	_	•	·	<u>.</u>	<u>.</u>			
	Oil 🔲	Dry Gas	Ef	fective 1	December	1, 199	1			
Disinge in Operator	Casinghead Gas	Condennate								
change of operator give name			ountoin '	View Dr,	Suite 7	nn Hou	ston. TX	77057		
nd address of previous operator LOTV	rest Energy Co	orp, 2401 F	Duillami	VIEW DI,	Juice 7	00, 1100	30011, 11			
L DESCRIPTION OF WELL	AND LEASE									
Lease Name	Well No.	Pool Name, include	ing Formation		Kind of	Kind of Lease N State Factors Notice F-8327				
State ''W''		Jalmat T-	Y-SR				E-832	/		
Location		,	> <b>4</b> 1-	1 (	980		East			
Unit Letter O	:660	Feet From The	SOUTH Lin	and	900 Fee	t From The	<u> Lase</u>	Line		
Section 36 Townshi	ip 24S	Range 30	6E, <b>N</b>	MPM,	Lea			County		
Section 36 Townshi	p 243	Kalije 3.	<u>, , , , , , , , , , , , , , , , , , , </u>	VII // L						
II. DESIGNATION OF TRAN	SPORTER OF O	IL AND NATU	RAL GAS							
Name of Amhorized Transporter of Oil	or Conde		Address (Giv	e address 10 w	hich approved	copy of this fo	orm is to be set	nt)		
Texaco Frading	+ Drang		1							
Name of Authorized Transporter of Calain	- , , —	or Dry Cas	Address (Gin	e address to w	nich approved	copy of this fo	rm 15 10 be se	nu)		
Sid Kichardson	, , , , , , , , , , , , , , , , , , , ,	Luadin	ls gas actual)	v e	When	?	<del> </del>			
If well produces oil or liquids,	Unit Sec	Two Rec	Tr Ser score	y competito:	i Amen	•				
f this production is commingled with that	from any other lease or	pool give comming	line order num	ber.						
V. COMPLETION DATA	nom any come arms of	, pour, p 10 no								
	Oil Wel	I Gas Well	New Well	Workover	Deepen	Piug Back	Same Res'	Diff Res'v		
Designate Type of Completion				1		Ļ				
Dene Spudded	Date Compl. Ready I	to Prod.	Total Depth			P.B.T.D.	P.B.T.D.			
		<u>.                                    </u>	Top Oil/Gas	Pav		Tark in The	1			
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation			10p Old Cas	ray		Tubing Depth				
Perforations	J					Depth Casir	ng Shoe			
A TOP OF PERSONS						1				
	TUBING	, CASING ANI	CEMENT	ING RECOI	3D					
HOLE SIZE		TUBING SIZE		DEPTH SE		SACKS CEMENT				
			·			<b></b>				
	₽.					-				
· · · · · · · · · · · · · · · · · · ·				<u> </u>		<del> </del>				
						_l				
V. TEST DATA AND REQUE	ST FOR ALLOW	ABLE			llauable for th	is death or be	for full 24 hos	ws.)		
OIL WELL (Test must be eiter Date First New Oil Run To Tank	recovery of total volum	c oj toga oti and mu	Producino N	Method (Flow, )	pemp, gas lift.	esc.)	, - ,			
Date Lik Men Oil Kim 10 1808	Date of Test		, ,		7 · 07 //	•		=		
Length of Test	Tubing Pressure		Casing Pres	sur		Choke Size				
,										
Actual Prod. During Test	Oil - Bbls		Water - Bb	Water - Bbis.			Gas- MCF			
GAS WELL		-								
Actual Prod. Test - MCF/D	Length of Test		Bbls. Cooo	en paue/MMCF	<del></del>	Gravity of	Condensate			
	<u> </u>					<u> </u>				
Testing Method (puol, back pr.) Tubing Fressure (Snu-m)			Caring Fre	seure (Sour-id)		Choke Size				
<u>'</u>										
VL OPERATOR CERTIFI					NSERV	MOITA	DIVISI	ON		
I hereby certify that the rules and reg	nulations of the Oil Con-	servation		OIL CC	NSERV 1		7991			
Division have been complied with an is true and complete to the best of m	id that the information p or impulsely and helief	zvez above	_			EN T	100.			
			Da	te Approv	/ed	<del></del>	<del></del>			
11. H. anton										
<u></u>	<b>7</b>		Ву	le	3. A		<del>Markett</del>			
V.H. Westbrook		<u> 1998 - 19</u>			\$ 15 m	GUPPLAN	(d)			
Primed Name	רבחבי	Trite 393-9714	Tit	le						
Date /2/3/9/		Telephone No.	•							
	•		11							

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