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

State of New Mexico rgy, Minerals and Natural Resources Departm

Form C-104 Revised 1-1-89 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., Aztec, NM 87410

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operato	τ			IO IN	ANGI	ONIO	L VIAD IAV	I ONAL G		ell A	PI No.			
Texa	co Explora		30 025 11027											
Address							····		- , 					
	Pox 730	Hobbs, NM	88241-	0730			(V) 64							
New W		heck proper box)		Change i	- T	moster of:		ner (Please expl	•		w An IDI	.	A O!	
Recongi											to Sirgo			
	in Operator	$\overline{\mathbf{X}}$	Casinghea	d Gas		lensate								
If char	operator giv				P (0. Box 35	31 Midia	ind, TX 79	9702					
	ess of previous	-				<u> </u>	o i ivildia	11u, 1X 7	3102					
Lease N	CRIPTION OF WELL AND LEASE Well No. Pool Name, Inclusion					ting Formation				Lease		Lease No.		
		IE MATTIX UN	ит	141	- 1	~	TIX 7 RVRS Q GRAYBURG			State Endaml on Ess		e NM7		
Location					 .				<u> </u>	DEI	JAL			
	Unit Letter	H	1962	<u> </u>	_ Feet 1	From The NO	ORTH Lin	e and660	<u>).</u>	. Fee	t From The	EAST	Line	
	Section	6 Townshi	_ 2	48	n	e 37E		· cm r			LEA		_	
	Secuon	O Townshi	<u> </u>		Kang	e	,N	MPM,			LEA		County	
I I.	GNATI	ON OF TRAN	SPORTE			ND NATU								
Name of		uthorized Transporter of Oil or Condensate						Address (Give address to which approved copy of this form is to be sent)						
		New Mexico Pipeline C						1670 Broadway Denver, Colorado 80202						
Naire	்யhorized Transporter of Casinghead Gas X or Dry Gas El Paso Natural Gas Company					y Gas	Address (Give address to which approved P. O. Box 1492 El				copy of this form is to be sent) Paso Tayas 79979			
If well o	duces oil or l	Unit	Sec.	Twp.	Rge.	Is gas actually connected?			When?					
ive for 1	m of tanks.		G	5	245	37E		YES	i		04,	/12/62		
f thi		mingled with that	from any oth	er lease or	pool, g	rive comming	ing order num	ber:						
<u>v.</u> ∈	MPLETIC	IN DATA	· -	Oil Well		Gas Well	New Well	Workover	D		M D1-	10		
Dag's	nate Type	of Completion	- (X)	i on wen	· [O25 Well	I HEM WELL	Morroset	Deeper	" ! !	Plug Back	 2sme Ket.A	Diff Res'v	
Date L	ded	"	Date Comp	l. Ready to	Prod.		Total Depth	L	<u> </u>		P.B.T.D.	L		
	(DE DYD D	(DE DEE OF OR A)						5-u						
Ele	(DF, RKB, RT, GR, etc.) Name of Producing Formation					n .	Top Oil/Gas Pay			Tubing Depth				
c ₁ ;							<u> </u>				Depth Casing Shoe			
		·	,				CEMENTI	NG RECOR						
	HOLE S	ZE	CASING & TUBING SIZE				DEPTH SET				SACKS CEMENT			
										\dashv			· · · · · · · · · · · · · · · · · · ·	
										-				
		ND REQUES							,					
	New Oil Run	est must be after re To Tank	Date of Tes		oj ioaa	ou and must		thod (Flow, pu				or full 24 hos	urs.)	
æ	Test		Tubing Pressure				Casing Pressure			Ţ	Choke Size			
ict :	od. During Tes						Water - Bbls.				Gas- MCF			
ici .	A. During Test Oil - Bbl			•			venci - Dub.				O40-11/O1			
 3/	ÆLL		L <u> </u>				L <u> </u>					•		
	·			of Test			Bbls. Condensate/MMCF			Gravity of Condensate				
·						DOING COMPOSITE WATER TO			[John VI Conscience				
x ! (cthod (pitot, back pr.) Tubing Pre			sure (Shut-in)			Casing Pressure (Shut-in)			Choke Size				
							l r							
		CERTIFICA		IL CON	SFR\	/Δ'	TION	אואופור	NC					
	y certify that the rules and regulations of the Oil Conservation on have been complied with and that the information given above						OIL CONSERVATION DIVISION							
	and complete to the best of my knowledge and belief.						Date Approved							
	1016							Date Approved						
<u>S</u> = 10	Ja Hea							By						
	J. A. Head Area Manager													
	Name Title August 23, 1991 505/393-7191					Title_		······································		·				
Direct		,			phone I								· 	
							L							

STRUCTIONS: 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.

ž

- 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.