NO. OF COPIES RECEIVED			5	
DISTRIBUTION				
SANTA FE				
FILE		/	-	
U.S.G.S.				
LAND OFFICE				
TRANSPORTER	OIL	1	<u></u>	
	GAS			
OPERATOR		2		
<del></del>				

(Date)

## NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE

Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65

Separate Forms C-104 must be filed for each pool in multiply completed wells.

ŀ	FILE / U		AND	Enective 1-1-03		
Ī	U.S.G.S.	AUTHORIZATION TO TRAN	NSPORT OIL AND NATURAL GA	s illene		
	LAND OFFICE			(Me)		
	TRANSPORTER GAS					
	OPERATOR 2					
ı.	PRORATION OFFICE					
	Operator Tesoro Petroleum Corpora	ation				
	Address					
	8520 Crownhill, San Anto	onio, Texas 78209	161 (0)			
	Reason(s) for filing (Check proper box)		Other (Please explain)			
	New Well	Change in Transporter of: Oil Dry Gas				
	Recompletion	Oil Dry Gas  Casinghead Gas Condens	— <del>                                    </del>			
	Change in Ownership	Cdshighedd dds				
	If change of ownership give name and address of previous owner					
H.	DESCRIPTION OF WELL AND L	EASE	emation / Kind of Lease	Lease No.		
	Lease Name	well No. Posouth Hospan	Hagen	or Fee Fee		
	Santa Fe	29 <del>Undesignate</del> d	Dakota			
	Location B 990	Feet From The North Line	e and 1680 Feet From T	East		
	Unit Letter B ; 990	Feet From The				
	Line of Section 7 Tow	mship 17N Range	8W , NMPM, McKi	nley County		
111	DESIGNATION OF TRANSPORT	ER OF OIL AND NATURAL GA	s	Table form in to be contil		
III.	Name of Authorized Transporter of Oil	X or Condensate	Address (otto basisto			
	Shell Pipe Line Company		PO Box 1588, Farmington Address (Give address to which approv	, New Mexico		
	Name of Authorized Transporter of Cas	inghead Gas or Dry Gas	Address (true address to which approv	ed copy of this form is so to com,		
	Used for lease fuel	Unit Sec. Twp. Rge.	Is gas actually connected? Whe	n		
	If well produces oil or liquids,	Unit Sec. Twp. Rge. D 7 17N 8W	No			
	give location of tanks.		give commingling order number:			
	If this production is commingled wit	h that from any other lease or pool,	give comminging order names.			
IV	. COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.		
	Designate Type of Completion		X	P.B.T.D.		
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	2660' KB		
	8-20-71	9-15-71	2705' (Sch1) Top Oil/Gas Pay	Tubing Depth		
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	2579'	2572'		
	6927'GL 6939'KB	Undesignated Dakota	231)	Depth Casing Shoe		
	Perforations	41-52' - Squeezed: 2579	-93' - 4 bullets/foot	2704' KB		
	2662-66' - Squeezed; 2641-52' - Squeezed; 2579-93' - 4 bullets/foot 2704' KB  TUBING, CASING, AND CEMENTING RECORD					
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
	12-1/4"	8-5/8"	137 KB	100 sx 300 sx		
	7-7/8"	5-1/2"	2704 KB	300 SX		
		2-3/8"	2572 KB			
		TO ALL ON A PLEASE AND A PARKET	for recovery of total volume of load oil	and must be equal to or exceed top allow-		
V	TEST DATA AND REQUEST F	able for this d	epth or be for full 24 hours)			
	OIL WELL Date First New Oil Run To Tanks Date of Test Producing Method (Flow, pump, gas lift, etc.)					
	9-24-71	9-26-71	Pumping	Lollabo Stor		
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size		
	24 hours	60 psi	135 psi	Ggs-MCF		
	Actual Prod. During Test	Oil-Bbls.	water - ppis.	14.6		
	43 bbls	30	13			
	GAS WELL N/A Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate		
	Actual Float Tool More	207121	<u> </u>			
	Testing Method (pitot, back pr.)	Tubing Pressure (Shue in)	Casing Pressure (Shut-in)	Choke Size		
		OIL CON				
v	I. CERTIFICATE OF COMPLIAN	ICE DIST.	OIL CONSERVA	ATION COMMISSION		
			ADDROVED	, 19		
I hereby certify that the rules and regulations of the Oil Conservation			a simple Signed by	By Original Signed by Emery C. Arnold		
Commission have been compiled with and that the same above is true and complete to the best of my knowledge and belief.						
TITLE  This form is to be filed in compliance with If this is a request for allowable for a new well, this form must be accompanied by a tabulated to the second se			\$0.EVEV.A	SUPERVISOR DIST. #3		
			compliance with RULE 1104.			
			If this is a request for allowable for a newly drilled or despended well, this form must be accompanied by a tabulation of the deviation taken on the well in accordance with RULE 111.			
	(Title) able on new and recompleted wells.					
	October 7, 1971    October 7, 1971   Fill out only Sections I, II, III, and VI for changes of ow well name or number, or transporter, or other such change of conditions are not to such changes of conditions are not changes are n			Light of orner agent enemies or several		
	$\alpha$	JULEJ	11			