

STATE		
FEDERAL		
U.S.		
DEPARTMENT OF		
TRANSPORTATION		
OPERATOR		
PRODUCTION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-105
Effective 1-1-83

Operator	Graham Royalty, Ltd.		
Address	1675 Larimer St., Suite 400, Denver, CO 80202		
Reason(s) for filing (Check proper box)	Other (Please explain)		
New Well <input type="checkbox"/>	Change in Transporter of:		
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/>	Dry Gas <input type="checkbox"/>	
Change in Ownership <input checked="" type="checkbox"/> 05/01/86	Casinghead Gas <input type="checkbox"/>	Condensate <input type="checkbox"/>	
If change of ownership give name and address of previous owner	Petro-Lewis Corp., P.O. Box 90500, Houston, TX 77290		

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
Hall Federal	2	Blanco Pictured Cliffs, S.	State, Federal or Fee Fed.	NM 080515
Location				
Unit Letter B	790	Feet From The South	Line and 1858 1850	Feet From The East
Line of Section 7	Township 23N	Range 1W	, NMPM, Rio Arriba County	

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)			
NA				
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)			
El Paso Natural Gas Company	P.O. Box 1492, El Paso, TX 79978			
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Pge.
NA				
Is gas actually connected?	When			
YES				

If this production is commingled with that from any other lease or pool, give commingling order number: _____

DESIGNATE TYPE OF COMPLETION - (X)										
	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'ty.	Diff. Res		
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.				
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth				
Perforations						Depth Casing Shoe				
TUBING, CASING, AND CEMENTING RECORD										
HOLE SIZE		CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT			

TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL			(Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)		
Date First New Oil Run To Tanks	Date of Test	Producing Method (oil, gas, etc.)			
Length of Test	Tubing Pressure	Casing Pressure			
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.			

GAS WELL			
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		OIL CONSERVATION COMMISSION MAY 14 1986	
I. CERTIFICATE OF COMPLIANCE		APPROVED _____	
BY _____		BY _____	
TITLE _____		TITLE _____	
This form is to be filed in compliance with RULE 1104.		This form is to be filed in compliance with RULE 1104.	
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviated tests taken on the well in accordance with RULE 111.		If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviated tests taken on the well in accordance with RULE 111.	
All sections of this form must be filled out completely for allowable on new and recompleted wells.		All sections of this form must be filled out completely for allowable 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.		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.	

T. G. Robbins
(Signature)
Prod. Acctg. Super.
(Title)
May 12, 1986
(Date)