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FILE		/	-
U.S.G.S.			
LAND OFFICE			_
TRANSPORTER	OIL		
	GAS	1	
OPERATOR		3	
PRORATION OFFICE			

October 30, 1975

(Date)

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-104

SANTA FE /	REQUEST	REQUEST FOR ALLOWABLE Supersedes Old C-104 and C-1		
FILE /		AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS		
U.S.G.S.	AUTHORIZATION TO TRA	ANSPORT OIL AND NAT	URAL GAS	
LAND OFFICE	<u> </u>			
TRANSPORTER OIL				
OPERATOR 3				
PRORATION OFFICE Operator				
· ·	. CORPORATION			
Address	COMUNICATION			
7890 E. P	rentice Ave., Englewood,	Colorado 80110		
Reason(s) for filing (Check proper b	pox)	Other (Please expi	lain)	
New Well	Change in Transporter of:		,	
Recompletion	Oil Dry Go	rs [
Change in Ownership	Casinghead Gas Conder	F		
			8 Ridgles Bank Building	
If change of ownership give name	TRANS DELTA OIL & GAS C	A	t Worth, Texas 76116	
and adನ್ಇತಿ of previous owner				
. DESCRIPTION OF WELL AN	D LEASE			
Lease Name	Well No. Pool Name, Including F		i of Lease Leas No.	
Douthit Browning	1 South Blanco	PC Stat	e, Federal or Fee Federal SF080345	
Location				
Unit Letter	.650 South Lin	ne and 1650	eet From The East	
Line of Section 5	Township 23N Range	IW , NMPM,	Rio Arriba County	
. DESIGNATION OF TRANSPO	RTER OF OIL AND NATURAL GA	is		
Name of Authorized Transporter of	Oil or Condensate	Address (Give address to wh	ich approved copy of this form is to be sent)	
į				
Name of Authorized Transporter of		1	ich approved copy of this form is to be sent)	
El Paso Natural Gas	Company	P. O. Box 1492	El Paso, Texas	
If well produces oil or liquids,	Unit Sec. Twp. Ege.	Is gas actually connected?	When	
give location of tanks.	1 1	Yes	1963	
If this production is commingled	with that from any other lease or pool,	give commingling order num	14-08-0001-8228	
. COMPLETION DATA	with that from any other rease of poor,	give comminging order num		
	Oil Well Gas Well	New Well Workover D	eepen Plug Back Same Res'v. Diff. Res'v.	
Designate Type of Comple	tion - (X)	1 1		
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
		<u> </u>		
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	
		<u> </u>		
TEST DATA AND REQUEST	FOR ALLOWABLE (Test must be a	fter recovery of total volume of	fload oil and must be equal to ar exceed-top allow-	
OIL WELL	able for this de	epth or be for full 24 hours)		
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pur	np, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
Actual Prod. During Test	Oil-Bbls.	Water - Bbis.	Gas-MCF	
			No. of Contract of	
GAS WELL				
Actual Prod. Test-MCF/D	Length of Test	Bbis. Condensate/MMCF	Gravity of Condensate	
		0.1	Cheba Stan	
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
<u></u>				
CERTIFICATE OF COMPLIA	ANCE	ORIGINAL SIGNED BY AS F ALADONES		
I hereby certify that the rules an	nd regulations of the Oil Conservation			
Commission have been complied	d with and that the information given the best of my knowledge and belief.			
spove is true and complete to	the best of my knowledge and belief.			
		TITLE PRITOLINIM	ENGINEER DIST. NO. 3	
ORIGINAL SIGNED BY	•		filed in compliance with RULE 1104.	
E. L. FUNDINGSLAND.	IR.	75 15 15 2 5 5 5 5 5 5	for allowable for a newly drilled or deepened	
	ignature)	I this form must be	accompanied by a tabulation of the deviation	
Vice President		tests taken on the well	in accordance with RULE 111.	
	(Title)	All sections of this able on new and recom	s form must be filled out completely for allow-	
(* ****/	II SDIE ON DEM SUG ISCOM!	homen wase.	

All sections of this form must be filled out completely to able 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.

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