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OPERATOR	1
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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-110
Effective 1-1-65

I.

Operator: Byron Oil Industries

Address: 7810 Drexel Drive, St. Louis, Missouri 63130

Reason(s) for filing *(Check proper box)*
- New Well [X]
- Recompletion [ ]
- Change in Ownership [ ]

Change in Transporter of:
- Oil [ ]
- Dry Gas [ ]
- Casinghead Gas [ ]
- Condensate [ ]

Other *(Please explain)*

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Hanson-Federal	1	Lybrook-Gallup	State, Federal or Fee: Federal	NM 080273

Location: Unit Letter L; 1650 Feet From The South Line and 700 Feet From The West

Line of Section 3 Township 23 N. Range 7 W., NMPM, Rio Arriba County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil [X] or Condensate [ ]: Rock Island Oil & Refining Company, Inc.
Address *(Give address to which approved copy of this form is to be sent)*: Box 328, Farmington, New Mexico

Name of Authorized Transporter of Casinghead Gas [X] or Dry Gas [ ]: Petroleum Consultants, Inc.
Address *(Give address to which approved copy of this form is to be sent)*: 2820 Central Avenue, S.E. Albuquerque, New Mexico 87106

If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	L	3	23 N	7 W	No	Gas line is Being constructed this da

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

IV. COMPLETION DATA

Designate Type of Completion – (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
	X		X					

Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
July 18, 1967	August 9, 1967	5735'	5695'
Elevations *(DF, RKB, RT, GR, etc.)*	**Name of Producing Formation**	**Top Oil/Gas Pay**	**Tubing Depth**
7020 Ground	Gallup	5367'	5663'
Perforations			**Depth Casing Shoe**
5379 to 5614 with 20 holes			5695'

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
7 7/8"	4½ O.D.	5735'	135
	2 3/8" O.D.	5663'	

V. TEST DATA AND REQUEST FOR ALLOWABLE

(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)

OIL WELL

Date First New Oil Run To Tanks	Date of Test	Producing Method *(Flow, pump, gas lift, etc.)*	
August 9, 1967	August 10, 1967	Flow	
Length of Test	**Tubing Pressure**	**Casing Pressure**	**Choke Size**
24 hours	250#	800#	20/64
Actual Prod. During Test	**Oil-Bbls.**	**Water-Bbls.**	**Gas-MCF**
208 bbls. of fluid	168	40	110

GAS WELL

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

RECEIVED JAN 25 1968 OIL CON. COM. DIST. 3

VI. CERTIFICATE OF COMPLIANCE

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.

Alan J. Byron
(Signature)
Alan J. Byron Sole owner, Byron Oil Industrie
(Title)
January 23, 1968
(Date)

OIL CONSERVATION COMMISSION

APPROVED JAN 25 1968, 19__

BY Original Signed by Emery C. Arnold

TITLE SUPERVISOR DIST. #3

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 deviation 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.

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 multiple completed wells.