

NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS		Form C-104 Supersedes OIL C-104 and C-105 Effective 1-1-65	
LAND OFFICE		OIL GAS	
TRANSPORTER		OPERATION	
PRORATION OFFICE		Operator	
Torreon Oil Co.			
Address			
Box 356 Flora Vista, N.M. 87415			
Reason(s) for filing (check proper box)		Other (Please explain)	
New Well	Change in Transporter of:	Formerly C.B.Harvey A#4	
Recompletion	Oil		
Change in Ownership	Casinghead Gas	Condensate	
change of ownership give name and address of previous owner Noel Reynolds Box 356 Flora Vista N.M.			
DESCRIPTION OF WELL AND LEASE			
Lease Name	Well No.	Pool Name, including Formation	Kind of Lease
San Luis Federal	13	San Luis Mesaverde	State, Federal or Fee Federal
Location			Lease No. SF081160F
Unit Letter	J	1691 Feet From The South	Line and 1701 Feet From The East
Line of Section	21	Township 18N	Range 3W, NMPM, Sandoval County
DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS			
Name of Authorized Transporter of Oil	or Condensate	Address (Give address to which approved copy of this form is to be sent)	
Thriftway Co.		P.O.Box 1367 Farmington N.M.87401	
Name of Authorized Transporter of Casinghead Gas	or Dry Gas	Address (Give address to which approved copy of this form is to be sent)	
Does well produce oil or liquids, give location of tanks.	Unit	Sec.	Twp.
			Pge.
Is gas actually connected?	When		
this production is commingled with that from any other lease or pool, give commingling order number:			
COMPLETION DATA			
Designate Type of Completion - (X)	Oil Well	Gas Well	New Well
			Workover
			Deepen
			Plug Back
			Same Res'tv.
			Diff. Res'tv.
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Elevations (DF, RNB, RT, CR, 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 (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
AS WELL			
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION	
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.		APPROVED DEC 12 1978	
		BY Original Signed by A. R. Kendrick	
		TITLE SUPERVISOR DIST. #3	
Torreon Oil Co. (Signature)		This form is to be filed in compliance with RULE 1104.	
Noel Reynolds (Title)		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.	
12-9-78 (Date)		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 filled for each pool in multiply completed wells.	