

STATE OF TEXAS  
OIL AND NATURAL GAS  
DIVISION OF OIL AND NATURAL GAS  
TRANSPORTER  
OIL  
GAS  
OPERATOR  
PRODUCTION OFFICE

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-105  
Effective 1-1-85

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

1. DESCRIPTION OF WELL AND LEASE  
Lease Name  
Fed. (602)A-19  
Well No.  
1  
Pool Name, including Formation  
Blanco Pictured Cliffs, S.  
Kind of Lease  
State, Federal or Fee  
Fed.  
Lease No.  
SF 079150  
Location  
Unit Letter  
J  
1600 Feet From The  
South Line and  
1600 Feet From The  
East  
Line of Section  
19  
Township  
23N  
Range  
1W  
NMPM, Sandoval  
County

2. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  
Name of Authorized Transporter of Oil ☐ or Condensate ☐  
NA  
Address (Give address to which approved copy of this form is to be sent)  
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐  
El Paso Natural Gas Company  
Address (Give address to which approved copy of this form is to be sent)  
P.O. Box 1492, El Paso, TX 79978  
If well produces oil or liquids, give location of tanks.  
NA  
Unit  
Sec.  
Twp.  
Rge.  
Is gas actually connected?  
YES  
When

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

V. COMPLETION DATA  
Designate Type of Completion - (X)  
Oil Well ☐ Gas Well ☐ New Well ☐ Workover ☐ Deepen ☐ Plug Back ☐ Same Res'v. ☐ Diff. Res'v. ☐  
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

V. 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

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

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.  
T. G. Robbins  
(Signature)  
Prod. Acctg. Super.  
(Title)  
May 12, 1986  
(Date)  
OIL CONSERVATION COMMISSION  
APPROVED  
MAY 14 1986  
BY  
SUPERVISOR DISTRICT # 50  
TITLE  
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.