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Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

Corrected Transporter

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator SIO Company		Well API No.
Address 2310 Mid-Continent Tower, Tulsa, Oklahoma 74103		
Reason(s) for Filing (Check proper box) New Well <input type="checkbox"/> <input type="checkbox"/> Other (Please explain) Recompletion <input type="checkbox"/> Change in Transporter of: Change in Operator <input checked="" type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input checked="" type="checkbox"/> Condensate <input type="checkbox"/> Effective 12/1/89		
If change of operator give name and address of previous operator Ramsey Property Mgmt., Inc.; P.O. Box 13237, Okla. City, OK 73113		

II. DESCRIPTION OF WELL AND LEASE

Lease Name Jicarilla "O"	Well No. 3	Pool Name, including Formation West Lindrith Gallup-Dakota	*Jicarilla Indian Kind of Lease State, Federal or Fee* 417
Location Unit Letter I : 1705 Feet From The South Line and 865 Feet From The East Line Section 10 Township 22N Range 3W , NM PM, Sandoval County			

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Giant Refining Co.	Address (Give address to which approved copy of this form is to be sent) 5107 No. 7th St., Phoenix, AZ 85014	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> SIO Company	Address (Give address to which approved copy of this form is to be sent) 2310 Mid-Continent Bldg., Tulsa, OK 74103	
If well produces oil or liquids, give location of tanks.	Unit B	Sec. 10
	Twp. 22N	Rge. 3W
Is gas actually connected? Yes When?		

IV. 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		CEMENT			
RECEIVED DEC 01 1989 OIL CON. DIV.								

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 DIST 3 be for full 24 hours.)	
Date First New Oil Run To Tank	Date of Test
Length of Test	Tubing Pressure
Actual Prod. During Test	Oil - Bbls.
Producing Method (Flow, pump, gas lift, etc.)	
Casing Pressure	Choke Size
Water - Bbls.	Gas - MCF
NOV 13 1989	

GAS 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

VI. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

SIO Company

Signature
Patrick B. Cobb
Printed Name
November 6, 1989
Date
918/582-5400
Title
President
Telephone No.

OIL CONSERVATION DIVISION

Date Approved **NOV 17 1989**

By **Supervisor**

SUPERVISOR DISTRICT #3

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.