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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

B.K.

Operator SOUTHERN UNION PRODUCTION COMPANY	
Address P. O. Box 808, FARMINGTON, NEW MEXICO 87401	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>



If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name JICARILLA "L"	Well No. 6	Pool Name, Including Formation OTERO GALLUP	Kind of Lease State, Federal or Fee FEDERAL	Lease No. CONTRACT #10
Location				
Unit Letter M	Feet From The 830	SOUTH Line and 790	Feet From The WEST	
Line of Section 34	Township 25 NORTH	Range 5 WEST	, NMPM, RIO ARRIBA 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"/> PLATEAU, INC.	Address (Give address to which approved copy of this form is to be sent) FARMINGTON, NEW MEXICO 87401	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> SOUTHERN UNION GAS COMPANY	Address (Give address to which approved copy of this form is to be sent) FIDELITY UNION TOWER, DALLAS, TEXAS 75201 ATTN: ROBERT MCRAAY	
If well produces oil or liquids, give location of tanks.	Unit M	Sec. 34
	Twp. 25N	Rge. 5W
	Is gas actually connected? No When	

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 <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v. <input type="checkbox"/>	Diff. Res'v. <input type="checkbox"/>
Date Spudded 11/28/71	Date Compl. Ready to Prod. 12/22/71		Total Depth 7210 Ft. R.K.B.		P.B.T.D. 7173 Ft. R.K.B.			
Elevations (DF, RKB, RT, GR, etc.) 6764 Ft. R.K.B.	Name of Producing Formation GALLUP		Top Oil/Gas Pay 6066 Ft. R.K.B.		Tubing Depth 6176 Ft. R.K.B.			
Perforations 6066 - 6356 Ft. R.K.B.					Depth Casing Shoe 7209 Ft. R.K.B.			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4"	8-5/8"		303 Ft.		250 SACKS			
7-7/8"	5-1/2"		7209 1ST STAGE CEMENTED W/600 CU. FT. CEMENT.		STAGE COLLAR SET AT 5178 FT. 2ND STAGE CEMENTED W/400 CU. FT. CMT. STAGE COLLAR SET AT 3807 FT.			
3RD STAGE CEMENTED W/1300 CU. FT. CEMENT.			2-1/16" TBG. SET AT 6176 FT.					

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)

Date First New Oil Run To Tanks 1/14/72	Date of Test 1/14/72	Producing Method (Flow, pump, gas lift, etc.) FLOW	
Length of Test 24 HOURS	Tubing Pressure 21	Casing Pressure 336	Choke Size 3/4"
Actual Prod. During Test 30	Oil - Bbls. 30	Water - Bbls. -0-	Gas - MCF 379

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

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.

GILBERT D. NOLAND, JR.
(Signature)
Original signed by
GILBERT D. NOLAND, JR.

DRILLING SUPERINTENDENT
(Title)

JUNE 9, 1972
(Date)

OIL CONSERVATION COMMISSION

JUN 12 1972, 19

APPROVED _____

BY **Original Signed by A. R. Kendrick**

TITLE **PETROLEUM ENGINEER DIST. NO. 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.