## DISTRIBUTEDA NEW MEXICO OIL CONSERVATION COMMISSION Form C+104 Suversedes Old C-104 and C-110 SZHIAFL REQUEST FOR ALLOWABLE Effective 1-1-65 FILE AND U.S.G.S. AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS LAND OFFICE OIL TRAFFPORTER GAS OPERATOR PRORATION OFFICE Operator DOME PETROLEUM CORP 501 Airport Drive, Suite #114, Farmington, New Mexico Reoson(s) for filing (Check proper box) 87401 Other (Please explain) Change in Transporter of: Dry Gas Oil Recompletion Casinghead Gas Condensate Change in Ownership X Lynco Oil Corporation, Suite E 300, 8233 Via Paseo Del Norte, If change of ownership give name and address of previous owner \_\_\_\_ Scottsdale, Arizona 85258 II. DESCRIPTION OF WELL AND LEASE Kind of Lease Well No.; Pool Name, Including Formation Lease Name State, Federal or Fee -e a NM03451 South Blanco-Pictured Cliffs Regina Location West 1650 Feet From The 1850 Feet From The South Line and Unit Letter , NMPM, Rio Arriba 34 Township 24N Range <u>1W</u> Line of Section III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be sent) or Condensate Name of Authorized Transporter of OII Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Casinghead Gas or Dry Gas P. 0. Box 1492, El Paso, Texas El Paso Natural Gas Company P.ge. Is gas actually connected? Twp. Sec. Unit If well produces oil or liquids, give location of tanks. If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Same Res'v. Diff. Res'v. Deepen Workever Oil Well Gas Well New Well Designate Type of Completion - (X) P.B.T.D. Total Depth Date Compl. Ready to Prod. Date Spudded Tubing Depth Top Oll/Gas Pay Name of Producing Formation Elevations (DF, RKB, RT, GR, etc., Depth Casing Shoe TUBING, CASING, AND CEMENTING RECORD SACKS CEMENT CASING & TUBING SIZE HOLE SIZE (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) V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL Producing Method (Flow, pump, gas lift, etc.) Date First New CII Run To Tanks MIN M Date of Test Choke SI Cosing Pressure Tubing Pressure Length of Test Water - Bbls. uun s Gas - MC Oll-Bbla. Actual Pred. During Test DIST GAS WELL Gravity of Con-Bbis. Condensate/MMCF Length of Test Actual Prod. Test-MCF/D

Choke Size Cosing Pressure (Shut-in) OIL CONSERVATION COMMISSION

Lease No.

## VI. CERTIFICATE OF COMPLIANCE

Testing Method (pirot, back pr.)

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.

(Tule)

M. Belley Suret (Signature)

H. D. HOLLINGSWORTH

Drilling & Production Foreman

June 5, 1981 Date

Tubing Pressure (Shut-in)

BY.

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SUPERVISOR DISTRICT # 3 TITLE \_

This form is to be filed in compilence with NULE 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 multiply mobiled wells.