

DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
REGISTRATION OFFICE	

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.R.

Cotton Petroleum Corporation	
Address 2502 Lincoln Center Bldg. 1660 Lincoln St. Denver Colo	
Reason(s) for filing (Check proper box)	
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"/>
Other (Please explain)	

If change of ownership give name
and address of previous owner

I. DESCRIPTION OF WELL AND LEASE

Lease Name Apache	Well No. 104	Pool Name, including Formation Lindcith-Gallup Dakota West	Kind of Lease Leasehold	Lease No. CONTRACT # 127
Location Unit Letter P : 790 Feet From The South Line and 790 Feet From The East				
Line of Section 3 Township 24 North Range 4R, NMPM, Rio Arriba County				

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Permian Corporation	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1702 Farmington N.M. 87401	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> EL PASO NAT GAS CO.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 990 Farmington N.M. 87401	
If well produces oil or liquids, give location of tanks.	Unit P	Sec. 3
	Twp. 24N	Rge. 4W
	Is gas actually connected? Yes	When 7/18/78

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

III. 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't. Diff. Res't.
Date Spudded 12-10-77	Date Compl. Ready to Prod. 6-7-78	Total Depth 7476 K.B.		P.B.T.D. 7408 K.B.			
Elevations (DF, RKB, RT, GR, etc.) 6810 G. 6822 K.B.	Name of Producing Formation Dakota		Top Oil/Gas Pay Dakota 7132		Tubing Depth 7106 K.B.		
Perforations 7431-7207, 7239-7340 (gross interval)		Depth Casing Shoe					
TUBING, CASING, AND CEMENTING RECORD							
HOLE SIZE 12 1/4	CASING & TUBING SIZE 8 5/8		DEPTH SET 336		SACKS CEMENT 300		
7 7/8	4 1/2		7472		250		
2 3/8			7106				

IV. 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 6-9-78	Date of Test 7-13-78	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24 hrs	Tubing Pressure 75	Casing Pressure 0	Choke Size 24/64
Actual Prod. During Test	Oil - Bbls. 84	Water - Bbls. 0	Gas - MCF 147

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

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.

D.E. Wood (by Howard Davis)
(Signature)
District Area Manager
(Title)
7/19/78
(Date)

OIL CONSERVATION COMMISSION

APPROVED JUL 19 1978
Original Signed by A. J. Kendrick
BY
TITLE SUPERVISOR DIST. 34

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.
Separate Forms C-104 must be filed for each pool in multiple.