HO. OF COPIES RECEIVED		>	
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SANTA PE		17	
FILE		17	7
U.\$.G.S.			
LAND OFFICE			
TRAMSMORTER	OIL		
	GAS	\prod	
OPERATOR			
PRORATION OFFICE			

NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE **CINY**

Form C=104
Supersedes Old C=104 and C=
Effective 1=1-65

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

LAND OFFICE					
TRANSPORTER GAS	Tampanana C 104 to allow tractions of 11 to 12				
OPERATOR /	to minimize waste	Temporary C-104 to allow testing of well down pipeline			
PRORATION OFFICE	to minimize waste				
Cotton Petroleum	Corporation		•		
717 17th Street,	Suite 2200, Denver, Color				
Reason(s) for filing (Check proper b	Change in Transporter of:	Other (Please explain)			
Recompletion	OII Dry G	Sas			
Change in Ownership.	Casinghead Gas Cond	ensate			
If change of ownership give name and address of previous owner					
DESCRIPTION OF WELL AN	D LEASE				
Apache	Well No. Pool Name, Including I 122 Lindrith Gal		se Jicarilla Lease No. ralor Fee Indian 129		
Location I Unit Letter ;	1980 Feet From The South Li	ne and Feet From	East		
Line of Section 13 T	Line of Service 13 Terrebra 24N Breez AW March Pio Ampiles				
Eline of Section 10 1	ownship 2411 Nuide	TH , NMPM, RTO A	TIDA County		
DESIGNATION OF TRANSPOR	RTER OF OIL AND NATURAL GA		aved capy of this form is to be sent!		
Basin Incorporated		Address (Give address to which approved copy of this form is to be sent) 511 W. Ohio Street, Midland, Texas 79701			
	Name of Authorized Transporter of Casinghead Gas X or Dry Gas Address (Give address to which approved copy of this form is to be sent)				
El Paso Natural Ga	as Company	P.O. Box 990, Farming	ton, New Mexico 87401		
If well produces all or liquids, give location of tanks.	Unit Sec. Twp. P.ge.	Is gas actually connected? When			
· · · · · · · · · · · · · · · · · · ·	with that from any other lease or pool,				
COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.		
Designate Type of Complet	ion - (X) (X)	(X)	1 1		
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
2-20-79		7550'			
Elevations (DF, RKB, RT, GR, etc.) 6892 GR	•	Top Oil/Gas Pay	Tubing Depth		
Perforations	Gallup Dakota	<u> </u>	Depth Casing Shoe		
			7550'		
	TUBING, CASING, AND	CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
12-1/4"	8-5/8"	390'	275 sxs to surface		
7-7/8"	4-1/2"	7550' stage]	600 sxs 725 sxs		
			ie 4109'		
TEST DATA AND REQUEST F			and must be equal to or exceed top allow-		
OIL WELL Date First New Cil Bun To Tanks	Date of Test	Producing Method (Flow, pump, gas li	fi, etc.)		
			Tach		
Length of Test	Tubing Pressure	Casing Pressure	Choke Size		
Actual Prod. During Test	Oil-Bbis.	Water-Bbls.	Gae-MCF		
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 Ske		
CERTIFICATE OF COMPLIAN	CE	OIL CONSERVA	TION COMMISSION		
•		APPROVED	30 19/9		
	been complied with and that the information given Original Signed by A. R. Kendrick				
bove is true and complete to the best of my knowledge and belief.		SUPERVISOR DIST. 30			
	اد ،	TITLE			
This form is to be filed in compliance with RULE 1104. If this is a request for silowable for a newly drilled or defined by a second of the desired by a se					
		If this is a request for allowable for a newly drilled or deepened			
Division Production Manager		well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with MULE 111.			
(Title)		All sections of this form must be filled out completely for allowable on new and recompleted wells.			
March 27, 1979 (Date)		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 completed wells.