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SANTA FE	SANTA FE			
FILE	FILE		1	_
U.S.G.S.	U.S.G.S.			
LAND OFF	AND OFFICE			
TRANSPORTER	TER	OIL	2	7
	GAS	1		
OPERATOR		1		
PRORATION OFFICE				

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	DISTRIBUTION	NEW MEXICO OIL	CONSERVATION COMMISSION	Form C-104			
	SANTA FE /	REQUEST FOR ALLOWABLE Supersedes Old C-104		Supersedes Old C-104 and C-11			
	AND U.S.G.S. AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS						
	LAND OFFICE	AUTHORIZATION TO TR	ANSPORT OIL AND NATURAL	. GAS			
	TRANSPORTER OIL 2						
	OPERATOR /						
I.	PRORATION OFFICE						
	Operator Constitution Dog						
	SOUTHERN UNION PRO	DUCTION COMPANY					
		MINGTON, NEW MEXICO 874	.01				
	Reason(s) for filing (Check proper box	:)	Other (Please explain)				
	New Well	Change in Transporter of:					
	Recompletion Change in Ownership	Oil Dry G	= 1				
	Change in Ownership	Casinghead Gas Conde	inside []				
	If change of ownership give name and address of previous owner						
II.	DESCRIPTION OF WELL AND	LEASE Well No. Pool Name, Including F	Formation Kind of Le	ase Lease No.			
	JICARILLA "H"	8 UNDESIGNATED	GALLUP State, Fede	CONTRACT			
	Location			FEDERAL #103			
	Unit Letter P; 79	OFeet From The SOUTH Lin	ne and 790 Feet Fro	m The EAST			
	Line of Section 19 To	wnship 26N Range	4W , NMPM,	RIO ARRIBA County			
111.	Name of Authorized Transporter of Ol	TER OF OIL AND NATURAL GA		roved copy of this form is to be sent)			
	Name of Authorized Transporter of OI NEW MEXICO TANKERS	TNC, 10%	FARMINGTON, NEW MEXICO	** ' '			
	Name of Authorized Transporter of Ca	PLATEAU INC. 90% i Authorized Transporter of Casinghead Gas or Dry Gas XX		roved copy of this form is to be sent)			
	SOUTHERN UNION GAS	COMPANY	PALLAS, TEYAS 75201	ATTN: ROBERT MCCRARY			
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge.	DALLAS, TEXAS 75201 Is gas actually connected? No	When			
	If this production is commingled wi	th that from any other lease or pool,	1				
IV.	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.			
	Designate Type of Completion	on - (X) XX Date Compl. Ready to Prod.	XX Total Depth	P.B.T.D.			
	9/16/69	9-28-69	7725 FT. R.K.B.	7681 FT. R.K.B.			
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth			
	6726 FT. R.K.B. Perforations	GALLUP	6992 FT. R.K.B.	6980 FT. R.K.B. Depth Casing Shoe			
	6992 - 6998 FT. 7717 FT. R.K.B.						
		TUBING, CASING, AND CEMENTING RECORD					
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT			
	13-3/4*	10/3/4"	307 FT.	250 sks.			
	9 -7/8* 6-3/1*	7-5/8* 5-1/2*(Line	3542 FT. (B) 3382-7717 FT.	1000 CU.FT.			
	<u> </u>	1-1/2* (IJ)	6980 FT.	700 GU.FT.			
v.	TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a	after recovery of total volume of load o	il and must be equal to or exceed top allow-			
	OIL WELL Date First New Oil Run To Tanks	Date of Test	epth or be for full 24 hours) Producing Method (Flow, pump, gas	lift, etc.)			
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size			
	Actual Prod. During Test	Oil-Bbis.	Water - Bbls.	Gas - MCF			
	GAS WELL			NOTE CON. COM. / NOTE CON. COM. /			
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condemnate			
	566	3 HOURS					
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size			
3 /2	BACK PRESSURE	1074 (7 DAYS)	1165 (7 DAYS)	3/4"			
¥ 1.	CERTIFICATE OF COMPLIAN	CE	JIL CONSERV	VATION COMMISSION 1 1963			
	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.		APPROVED, 19				
			By Original Signed by Emery C. Arnold				
			TITLE SUPERVISOR OF THE				
		Original signed by		compliance with RULE 1104.			
		GILBERT D. NOLAND, JR.	If this is a request for all	owable for a newly drilled or deepened			
G	ILBERT D. NOLAND, JRGSien		well, this form must be accommodate taken on the well in accommodate.	panied by a tabulation of the deviation ordance with RULE 111.			
	DRILLING SUPERINT	ENDENT (tle)	All sections of this form must be filled out completely for allow-				
	DECEMBER 10, 1969		able on new and recompleted	Fill out only Sections I. H. III, and VI for changes of owner,			
		ate)	well name or number, or transpo	orten or other such change of condition.			
			Separate Forms C-104 mi	ist be filed for each pool in multiply			