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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

Operator Southern Union Production Company	
Address P.O. Box 803, 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 "D"	Well No. 14	Pool Name, Including Formation Tapacito Pictured Cliffs	Kind of Lease State, Federal or Fee Federal	Lease No. Contract #100
Location Unit Letter I ; 1790 Feet From The South Line and 865 Feet From The East Line of Section 29 Township 26 North Range 3 West , NMPM, Rio Arriba County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	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"/>	Address (Give address to which approved copy of this form is to be sent) 1500 Fidelity Union Tower Bldg. Dallas, Texas 75201 Attn: Robert McCrary					
If well produces oil or liquids, give location of tanks.	Unit I	Sec. 29	Twp. 26N	Rge. 3W	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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		XX	XX					
Date Spudded 9-19-74	Date Compl. Ready to Prod. 11-23-74		Total Depth 3975 Ft.		P.B.T.D. 3900 Ft.			
Elevations (DF, RKB, RT, GR, etc.) 7168 Ground Level	Name of Producing Formation Pictured Cliffs		Top Oil/Gas Pay 3828 Ft.		Tubing Depth 3728 Ft.			
Perforations 3828 - 3853 Ft.					Depth Casing Shoe 3972 Ft.			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4"	8-5/8"		167 Ft.		150 Sacks			
7-7/8"	4-1/2"		3972 Ft.		Stage Collor set @ 2563 Ft.			
1st stage cemented w/220 Sks. 2nd stage cemented w/350 sks.								
1-1/2" E.U.E.					3728 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	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test-MCF/D 2434	Length of Test 3 Hours	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.) Back Pressure	Tubing Pressure (shut-in) 807	Casing Pressure (shut-in) 807	Choke Size 3/4"

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.

Original signed by
Dan R. Collier (Signature)
Office Manager (Title)
December 9, 1974 (Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19____
Original Signed by **Robert C. Arnold**
BY _____
TITLE _____
SUPERVISOR DIST. #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.
Separate Forms C-104 must be filed for each pool in multiply completed wells.