STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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BANTA FE			1
FILE		1	1
U.1.0.1.		1	1
LAND OFFICE		1	†
TRANSPORTER	PICE OIL CAS		
	GAS		
PERATOR		\Box	
PROBATION OFF	HC &	_	

OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

Form C-104 Revised 10-01-78 Format 06-01-83 Page 1

REQUEST FOR ALLOWABLE

OPERATOR		FOR ALLOWABLE	•	
PROMATION OFFICE		AND	- 1331 5 332	
	LUTHORIZATION TO TRAI	NSPORT OIL AND N	ATURAL GAS	
Operator .				
Hixon Development Company			0.00	
Address			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
P.O. Box 2810, Farmington,	New Mexico 87499			
leoson(s) for filing (Check proper box)		100		
New Well C	hange in Transporter of:	Other (P	lease explain)	
Recompletion	T			
Change in Ownership	5 H	Dry Gas		
		Condensate	•	
change of ownership give name Sout	hern Union Funt			
d address of previous ownerSOUT	mern onion explora	ation Co., 334	U.S. Hwy. 64, Farmington	n, N.M. 87
DESCRIPTION OF WELL AND LEAS		•		
W	ell No. Pool Name, including	Formation	Kind of Lease	
	1 Bisti Lower	Gallup	State, Federal or Fee Federal	Leces No.
ocation		——— <u>-</u>	rederal	NM 33027
Unit Letter P . 660	South	ine and660	_	
	eet From The South	ine and	Feet From The East	
Line of Section 3 Township	25N	13W		
Township	Range	NN, WELL	_{IРМ} , San Juan	Ca
DESIGNATION OF TRANSPORTER				County
L. DESIGNATION OF TRANSPORTER	OF OIL AND NATURA	I GAS		
Gary Energy Corp.	or Condensate	Adarona (Give addre	ss to which approved copy of this form is	
- -		P.O. Box 159	, Bloomfield, N.M. 8741	2
ame of Authorized Transporter of Casinghead (Gas Or Dry Gas	Address (Give addre	es to which approved copy of this form is	
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well produces oil or liquids. Unit	Sec. Twp. Rge.	<u> </u>		
man bracesa oil of Hdatas'		ls gas actually conne		
P location of tanks.	3 25N 13W	Is gas actually conne	cted? When	
ve location of tanks.	3 25N 13W	Is gas actually conne	cted? When	
his production is commingled with that fr	om any other lease or pool,	Is gas actually conne	cted? When	
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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.

V. COMPLETION DATA	· · · · · · · · · · · · · · · · · · ·				T 2		-	T =	
Designate Type of Completion	on - (X)	Gas Well	New Well	Workover	Deepen	Plug Back	Same Restv.	Diff.	Hes'v.
Date Spudded	Date Compl. Ready to F	Prod.	Total Depti	1		P.8.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth				
Perforations			_1			Depth Casi	ng Shoe		·
	TUBING,	CASING, AN	D CEMENTI	NG RECOR	D				
HOLE SIZE	CASING & TUBI			DEPTH SE		S,	ACKS CEME	17	
	<u> </u>					 			
									
/. TEST DATA AND REQUEST OIL WELL	FOR ALLOWABLE	Test must be a able for this d	ofter recovery epih or be for	of socal value full 24 hours	ne of load oil	and must be e	qual to or exc	eed top	ollou-
Date First New Oil Run To Tanks	Date of Test		Producing Method (Flow, pump, gas lift, etc.)						
Length of Test	Tubing Pressure		Casing Pre	****	•	Choke Size	· · · · · · · · · · · · · · · · · · ·		
Actual Prod. During Test	Oil-Bbla.		Water - Bbir).		Gae - MCF	<u> </u>		
AS WELL									
Actual Prod. Tool-MCF/D	Length of Test		Bbis. Cond	ensate/MMC	÷	Cravity of	Condensate		
Teeting Method (pitot, back pr.)	Tubing Pressure (Shut	(al-:	Casing Pre	sews (bbat-	-in)	Choke Size)		