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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

W/2 NW/4 80 acres.

Operator		J. Gregory Herrion, Robert L. Bayless and Ater, Inc.	
Address		Box 1541, Farmington, New Mexico 87401	
Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well	☒	Change in Transporter of:	
Recompletion	☐	Oil	☐
Change in Ownership	☐	Casinghead Gas	☐
		Dry Gas	☐
		Condensate	☐

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Western	3	Gallegos Gallup	State, Federal or Fee	SP278807
Location				
Unit Letter	D	Feet From The	North	Line and
		660		660
		Feet From The	West	
Line of Section	7	Township	26N	Range
			11W	, NMPM, San Juan
				County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐	Address (Give address to which approved copy of this form is to be sent)	
Permian Corporation	Petroleum Plaza Building, Farmington, NM 87401	
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)	
El Paso Natural Gas Company	P.O. Box 990, Farmington, New Mexico 87401	
If well produces oil or liquids, give location of tanks.	Unit	Sec.
	J	7
		26N
		11W
Is gas actually connected?	When	
Yes	3-26-74	

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.
	☒	☐	☐	☒	☐	☐	☒	☐
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
2-26-74	3-15-74		5200		5200			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
6122 DF	Gallup		5006		5215			
Perforations					Depth Casing Shoe			
5006-11, 5113-12, 5135-40, 5182-87, 5204-0, 5247-50					5303			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
13 3/4	17 3/4 32.75		171		150			
9 7/8	7 5/8 26.40		4177		250			
6 3/4	5 1/2 15.50		0-1511, 4105-5303		100, 300			
	2 3/2		5256					

V. 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	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
3-15-74	3-15-74	Pump	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 Hours	---	---	---
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gels/MCF
22	20	1	75

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MCF	Gravimetric Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

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.

OIL CONSERVATION COMMISSION

APPROVED _____ 19

BY **Original Signed by Emery C. Arnold**

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.