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TRANSPORTER	OIL	2		
	GAS			
OPERATOR		1		
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	SANTA FE / FILE / U.S.G.S.	NEW MEXICO OIL O REQUEST AUTHORIZATION TO TRA	Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65			
1.	TRANSPORTER OIL 7 GAS 1 OPERATOR I PROBATION OFFICE	- - -				
••	SOUTHERN UNION PRODUCTION COMPANY					
	P. O. Box 808, FARMINGTON, NEW MEXICO 87401					
	Reason(s) for filing (Check proper box		Other (Please explain)			
	New Well XX Recompletion	Change in Transporter of: Oil Dry Go	 			
	Change in Ownership	Casinghead Gas Conder	nsate			
	If change of ownership give name and address of previous owner	-				
II.	II. DESCRIPTION OF WELL AND LEASE Lease Name Well No. Pool Name, Including Formation Kind of Lease					
	HODGES	10 BASIN DAKOTA		al or FeeFEDERAL SF078432		
	Unit Letter D ; 790	Feet From The NORTH Lin	ne and Feet From	The WEST		
		wnship 26 NoRTH Range 8	8 WEST , NMPM, SAN	JUAN County		
III.	DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL GA	IS Address (Give address to which appr	oved copy of this form is to be sent!		
	Name of Authorized Transporter of Oil PLATEAU, INC 90: NEW MEXICO TANKERS Name of Authorized Transporter of Ca	or Condensate	FARMINGTON, NEW MEXIC FARMINGTON, NEW MEXIC Address (Give address to which appr			
	Name of Authorized Transporter of Ca	S COMPANY	P. O. Box 990, FARMING			
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. D 28 26 N 8 W	Is gas actually connected? W	hen		
IV.	If this production is commingled win COMPLETION DATA	th that from any other lease or pool,				
	Designate Type of Completion	1	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.		
	Date Spudded 12/14/66	Date Compl. Ready to Prod. 12/30/66	Total Depth 6868	P.B.T.D. 6850		
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation DAKOTA	Top Oil/Gas Pay 6596	Tubing Depth 6715		
	Perforations 6596 - 6794	VARUIA	4,7,4	Depth Casing Shoe 6856		
	TUBING, CASING, AND CEMENTING RECORD					
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
	12-1/4	8-5/8	309	250 sx		
	7-7/8	4-1/2 FT. CEMENT: 3RD STAGE W		GE W/600 CU.FT. CEMENT.		
	COLLARS @2327 & 48		6715	N/ IV. SX. REG.; 81 AGE		
V.	TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a	ifter recovery of total volume of load oi	l and must be equal to or exceed top allow-		
OIL WELL able 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.)				lift, etc.)		
	A statement	Tubing Pressure	Casing Pressure	Choke 12		
	Length of Test			of tive)		
	Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	7 1967		
	GAS WELL		į	OIL CON. COM.		
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Cond Seate		
	3359 Testing Method (pitot, back pr.)	3 HR Tubing Pressure (shut-in)	Casing Pressure (Shut-in)	Chok Sta		
	BACK PRESSURE	1965	1953	3/4*		
VI.	CERTIFICATE OF COMPLIAN		OIL CONSERV	ATION COMMISSION		
			APPROVED JAN 1 8 198	7 19		
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 Emery C. Afficia				
		SUPERVISOR DIST. 63				
	Original signed by			compliance with RULE 1104.		
GILBERT D. NOLAND, JR.		If this is a request for allowable for a newly drilled or deepened				
G	ILBERT D. NOLAND, JR. (Sign	ature)	well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.			
	DRILLING SUPERINTENDENT (Title) JANUARY 16, 1967 (Date)		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.			
	100		21			

Separate Forms C-104 must be filed for each pool in multiply completed wells.