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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

I. Operator
SOUTHERN UNION PRODUCTION COMPANY
Address
P. O. Box 808, FARMINGTON, NEW MEXICO 87401
Reason(s) for filing (Check proper box)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name NEWSOM #A	Well No. 6	Pool Name, including Formation BASIN DAKOTA	Kind of Lease State, Federal or Fee FEDERAL	Lease No. SF 078430
Location Unit Letter J ; 1745 Feet From The SOUTH Line and 1485 Feet From The EAST Line of Section 15 Township 26 N Range 8 W , NMPM, SAN JUAN 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"/> NEW MEXICO TANKERS, INC. - 10% PLATEAU, INC. - 90%	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"/> EL PASO NATURAL GAS COMPANY	Address (Give address to which approved copy of this form is to be sent) P. O. Box 990, FARMINGTON, NEW MEXICO 87401			
If well produces oil or liquids, give location of tanks.	Unit J	Sec. 15	Twp. 26 N	Rge. 8 W
	Is gas actually connected?		When	
	No			

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 9/28/67	Date Compl. Ready to Prod. 10/22/67		Total Depth 7480		P.B.T.D. 7464			
Elevations (DF, RKB, RT, GR, etc.) 7107 R.K.B.	Name of Producing Formation DAKOTA		Top XXX Gas Pay 7246		Tubing Depth 7349			
Perforations 7312 - 7460 FT.					Depth Casing Shoe 7479			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4"	8-5/8"		330		250 SACKS			
7-7/8"	4-1/2"		7479		1ST STAGE CEMENTED W/700 CU.FT.,			
2ND STAGE W/900 CU.FT.,			3RD STAGE W/1200 CU.FT.;			STAGE COLLARS SET AT 3161 FT AND 5515 FT. RKB.		
1-1/2" E.U.E.			7349					

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.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test-MCF/D 5,633	Length of Test 3 HOURS	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.) BACK PRESSURE	Tubing Pressure (shut-in) 2088	Casing Pressure (shut-in) 2050	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.

GILBERT D. NOLAND, JR. (Signature)
DRILLING SUPERINTENDENT

(Title)

NOVEMBER 14, 1967

(Date)

OIL CONSERVATION COMMISSION

APPROVED **NOV - 20 1967**
BY **Original Signed by Emery C. Arnold**
SUPERVISOR DIST. #3
TITLE

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.