

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

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LAND OFFICE	
TRANSPORTER	OIL 2 GAS 1
OPERATOR	1
PRORATION OFFICE	1

I.

Operator SOUTHERN UNION PRODUCTION COMPANY	
Address P. O. Box 808, FARMINGTON, NEW MEXICO 87401	
Reason(s) for filing (Check proper box)	
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"/>
Other (Please explain)	
If change of ownership give name and address of previous owner	

II. DESCRIPTION OF WELL AND LEASE

Lease Name NEWSOM "B"	Well No. 15	Pool Name, Including Formation BASIN DAKOTA	Kind of Lease State, Federal or Fee FEDERAL	Lease No. SFO78384
Location				
Unit Letter D ; 790 Feet From The NORTH Line and 1190 Feet From The WEST				
Line of Section 22 Township 26N Range 8W , 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 D	Sec. 22	Twp. 26N	Rge. 8W
				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 10/21/67	Date Compl. Ready to Prod. 11/20/67		Total Depth 7305 R.K.B.		P.B.T.D. 7286 R.K.B.			
Elevations (DF, RKB, RT, GR, etc.) 6930 FT. R.K.B.	Name of Producing Formation DAKOTA		Top Oil/Gas Pay 7058 R.K.B.		Tubing Depth 7161 R.K.B.			
Perforations 7058 - 7275					Depth Casing Shoe 7305			

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-1/4"	8-5/8"	335	225
7-7/8"	4-1/2"	7305	1ST STAGE W/700 CU.FT. CLASS "C"
2ND STAGE W/950 CU.FT. CLASS "C". 3RD STAGE W/1200 CU.FT. CLASS "C".		STAGE COLLARS AT 2922 FT. AND 5324 FT. R.K.B.	
	1-1/2" E.U.E.	7161	

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 Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test-MCF/D 3,260	Length of Test 3 HOURS	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.) BACK PRESSURE	Tubing Pressure (shut-in) 1997	Casing Pressure (shut-in) 1989	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
GILBERT D. NOLAND, JR.

GILBERT D. NOLAND, JR. (Signature)
DRILLING SUPERINTENDENT (Title)
DECEMBER 11, 1967 (Date)

OIL CONSERVATION COMMISSION

DEC 12 1967

APPROVED _____

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.

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