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LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATION	1
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NEW MEXICO OIL & GAS CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE

Form C-104  
Supersedes Old C-103 and C-110  
Effective 1-1-65

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

API 30-045-22652

Operator DOME PETROLEUM CORP.	
Address 501 Airport Drive, Suite 107, Farmington, New Mexico 87401	
Reason(s) for filing (Check proper box)	Other (Please explain)
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"/>

If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name FREW FEDERAL	Well No. 14	Pool Name, Including Formation <i>Beck Farmington</i> WFW FRUITLAND-PICTURED CLIFF	Kind of Lease State, Federal or Fee FEDERAL	Lease No. NM0560223
Location Unit Letter J : 1687 Feet From The SOUTH Line and 1850 Feet From The EAST				
Line of Section 29 Township 26N Range 12W, 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 type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
EL PASO NATURAL GAS COMPANY	BOX 990, FARMINGTON, NEW MEXICO 87401					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rgn.	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'tv.	Diff. Res'tv.
		X	X					
Date Spudded 01/02/79	Date Compl. Ready to Prod. 08/30/79		Total Depth 1230'		P.B.T.D. 875'			
Elevations (DF, RAB, RT, GR, etc.) 6066 GR	Name of Producing Formation FARMINGTON		Top Oil/Gas Pay 580'		Tubing Depth ---			
Perforations 580'-590' 2 jet shots/ft.					Depth Casing Shoe 1223'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
7 7/8"	5 1/2"		43'		35 sacks			
4 3/4"	2 7/8"		1223'		130 sacks			

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

API Well Test Number 387	Lease	Pool, Condensate/MMP	Gravity, Comp.
Testing Method (pilot, back pr.) BACK PRESSURE	Tubing Pressure (Shut-in) 220 psi	Casing Pressure (Shut-in) 220 psi	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.

*H.D. Hollingsworth*  
H.D. HOLLINGSWORTH (Signature)  
DRILLING & PRODUCTION FOREMAN  
(Title)  
September 14, 1979  
(Date)

OIL CONSERVATION COMMISSION

DEC 31 1979  
APPROVED \_\_\_\_\_, 19\_\_\_\_  
BY Original Signed by FRANK T. CHAVEZ  
TITLE DEPUTY OIL & GAS COM. CLERK

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 recompleted wells.