

DISTRIBUTION	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL GAS
OPERATION	
PRODUCTION OFFICE	

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-105
Effective 1-1-65

Operator: **LIVELY EXPLORATION COMPANY**

Address: **c/o Walsh Engr. & Production Corp.
P. O. Box 254 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:

I. DESCRIPTION OF WELL AND LEASE

Lease Name: Lively	Well No.: 19-E	Pool Name, including Formation: Basin Dakota	Kind of Lease: Federal	Lease No.: SF078622
Location: Unit Letter N ; 310 Feet From The South Line and 2390 Feet From The West				
Line of Section 12 Township 26N Range 8W , NMPM, San Juan County				

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> Plateau, Inc.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 489, Bloomfield, N.M. 87410
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input 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, N.M. 87401
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
	NO Unknown

If this production is commingled with that from any other lease or pool, give commingling order number:

III. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		X	X					
Date Spudded 7/13/81	Date Compl. Ready to Prod. 9/5/81	Total Depth 6886'		P.B.T.D. 6852'				
Elevations (DF, RKB, RT, CR, etc.) 6325' GL	Name of Producing Formation Dakota	Top Oil/Gas Pay 6818'		Tubing Depth 6868'				
Perforations: 6686'-6691'; 6702'04'; 6706'-08'; 6736'-38'; 6748'-52'; 6761'-63'; 6795'-97'; 6799'-6804'; 6814'-18'						Depth Casing Shoe 6711'		
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4"	8-5/8"		265'		250 sacks			
7-7/8"	4-1/2"		6886'		2100 sacks			
	1-1/2"		6711'					

IV. 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 P.T. 734; CAO-F-896	Length of Test 3 hrs.	Bbls. Condensate/MMCF -0-	Gravity of Condensate -0-
Testing Method (pilot, back pr.) Back Pressure	Tubing Pressure (shut-in) 1570	Casing Pressure (shut-in) 1625	Choke Size Pitot Tube

V. 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.

FOR: **LIVELY EXPLORATION COMPANY**
ORIGINAL SIGNED BY
Ewell N. Walsh
 Ewell N. Walsh, (Signature) President
 Walsh Engineering & Production Corp.
 (Title)
 10/9/81
 (Date)

OIL CONSERVATION COMMISSION
OCT 19 1981

APPROVED _____
 BY **Original Signed by FRANK T. CHAVEZ**
 SUPERVISOR DISTRICT # 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.