

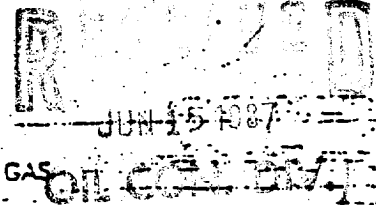
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OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 06-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS



DIST. 2

ROMO CORPORATION

P. O. BOX 1785, FARMINGTON, NM 87499

Reason(s) for filing (Check proper box)

☐ New Well	☐ Change in Transporter of:
☐ Recompletion	☐ Oil
☐ Change in Ownership	☐ casinghead Gas
	☒ Dry Gas
	☐ Condensate

Other (Please explain)

WE WERE NOTIFIED TO CHANGE TRANSPORTER TO SUNTERRA GAS GATHERING. NOW WE WERE INFORMED TO CHANGE BACK TO GAS COMPANY OF NM

If change of ownership give name and address of previous owner

I. DESCRIPTION OF WELL AND LEASE

Lease Name NEWSOM	Well No. 4-R	Pool Name, including Formation BALLARD PICTURED CLIFFS	Kind of Lease FEDERAL	Lease No. SF078433
Location Unit Letter G : 1620 Feet From The NORTH Line and 1470 Feet From The EAST Line of Section 18 Township 26N Range 8W N.M.P.M. SAN JUAN County				

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☐	Address (Give address to which approved copy of this form is to be sent)					
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒	Address (Give address to which approved copy of this form is to be sent)					
GAS COMPANY OF NEW MEXICO	P. O. BOX 1899, BLOOMFIELD, NM 87413					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected? YES	When JANUARY 19, 1987

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

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.

ROMO CORPORATION

Kenneth E. Roddy
KENNETH E. RODDY (Signature)
PRESIDENT

JUNE 12, 1987

(Title)

(Date)

OIL CONSERVATION DIVISION

APPROVED Frank T. Dwyer JUN 15 1987
BY _____
TITLE SUPERVISOR DISTRICT # 3

This form is to be filed in compliance with RULE 1104.
If this is a request for allowable for a newly drilled or deepener 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 multiple completed wells.

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OPERATOR	NATURAL GAS
REGISTRATION OFFICE	

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

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RECEIVED
MAY 21 1987
OIL CON. DIV.
DIST. 3

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

PERSON
ROMO CORPORATION
ADDRESS
P. O. BOX 1785, FARMINGTON, NEW MEXICO 87499

Reason(s) for filing (Check proper box)	Other (Please explain)
☐ New Well	
☐ Recompletion	
☐ Change in Ownership	
Change in Transporter of:	
☐ Oil	☒ Dry Gas
☐ Casinghead Gas	☐ Condensate

Change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Well Name NEWSOM	Well No. 4-R	Pool Name, including Formation BALLARD PICTURED CLIFFS	Kind of Lease FEDERAL	Lease No. SF-078433
Location			State, Federal or Free	

Unit Letter G : 1620 Feet From The NORTH Line and 1470 Feet From The EAST Line of Section 18 Township 26N Range 8W , NMPM, SAN JUAN County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

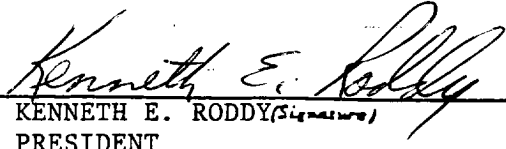
Name of Authorized Transporter of Oil ☐ or Condensate ☐ NONE	Address (Give address to which approved copy of this form is to be sent)
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒ SUNTERRA GAS GATHERING COMPANY	Address (Give address to which approved copy of this form is to be sent) P. O. BOX 26400, ALBUQUERQUE, NM 87125
If well produces oil or liquids, give location of tanks. Unit <u>G</u> Sec. <u>18</u> Twp. <u>26N</u> Rgs. <u>8W</u>	Is gas actually connected? <u>YES</u> When <u>JANUARY 19, 1987</u>

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

NOTE: Complete Parts IV and V on reverse side if necessary.

I. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.

ROMO CORPORATION

KENNETH E. RODDY (Signature)
PRESIDENT
(Title)
MAY 20, 1987
(Date)

OIL CONSERVATION DIVISION

APPROVED 
BY
TITLE SUPERVISOR DISTRICT # 3

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

V. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Some Rekey	Duff R.
		X						
Date Spudded 8/27/86	Date Compl. Ready to Prod. 9/17/86	Total Depth 2150'	P.B.T.D. 2092'					
Corrections (DF, RKB, RT, GR, etc.) 6246' KB.	Name of Producing Formation PICTURED CLIFFS	Top Oil/Gas Pay 1997'	Tubing Depth 1952'					
Interventions 1956'-1964': 1966'-1972': 1976'-1982': 1994'-1997"			Depth Casing Shoe 2134'					

TUBING, CASING, AND CEMENTING RECORD

MOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/4"	8 5/8"	171'	184 CU. FT.
7 7/8"	4 1/2"	2134'	609 CU. FT.
	1 1/2"	1952'	

TEST DATA AND REQUEST FOR ALLOWABLE (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

S WELL

Actual Prod. Test-MCF/D 1/4"THC 705; CAOF 4931	Length of Test 3 HR.	Bbls. Condensate/MCF -0-	Gravity of Condensate -0-
Setting Method (pump, back pr.) BACK-PRESSURE	Tubing Pressure (Shut-In) 282	Casing Pressure (Shut-In) 282	Choke Size 3/4"