SAUTATE ]		L CONSCRIVATION COMMISSION 5T FOR ALLOWABLE AND	Num C-104 Supersedes Old C-104 and C-17 Ellective 1-1-05
LAND OFFICE  FRANCHORTER OIL. / GAS /  OPERATOR /	AUTHORIZATION TO T	IRANSPORT OIL AND NATUR	•
Opinion OFFICE			
Husky Oil Company			
1600 South Cherry St	reet, Denver, Colorado	80222	
i Resson(a) for filing (Check proper	·	Other (Please explain	,
f Recompletion	Change in Transporter of: Oil Dry	Cas Change of or	perator.
i Change In Ownership	Casinghead Gas Con	ndensate 🗍	
If change of ownership give name and address of previous owner	El Paso Natural Gas	Co., 304 Texas St., I	El Paso, Texas 79978
DESCRIPTION OF WELL AN	D LEASE.   Well No.   Pool Nag.e, Including	- Satisfaction	
:Schwerdtfeger		7/1 07:00	oderal or Fee Federal 080382-A
Unit Letter K ; ]	550 Feet From The South t	Line and 1650 Feet F	rom The West
: Line of Section 28 1	Cownship 27N Range	11W , NMPM, S	San Juan County
DESIGNATION OF TRANSPO	RTER OF OIL AND NATURAL (	746	
: Name of Authorized Transporter of C	Oll [X] or Condensate		approved copy of this form is to be sent)
Plateau, Inc.		Box 108, Farmington, NM 87401	
El Paso Natural Gas Co.		Address (Give address to which approved copy of this form is to be sent) P. O. Box 1492, El Paso, Texas 79978	
. If well produces oil or liquids, : give location of tanks.	Unit Sec. Twp. P.ge. K 28 27N 11W	Is gas actually connected? When	
if this production is commingled w	with that from any other lease or pool	<u> </u>	<u>.                                    </u>
COMPLETION DATA	Oil Well Ggs Well	New Well Workover Deepen	
Designate Type of Complet		Joseph	Play Back Same Nesve. Bill. Resiv.
. Date Spadded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
Perforations			Depth Casing Shoe
	TUBING, CASING, AN	ID CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
FEST DATA AND REQUEST F		after recovery of total volume of load epth or be for full 24 hours)	oil and must be equal to or exceed top allow-
Date Firet New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, ga.	s lift, etc.)
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
actual Fred, During Test	Oil-Bhia.	Water - Bble.	Gas-MCF
AS WELL			No. of the second secon
notual Prof. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
eeung Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Freesure (Shut-in)	Choke Size
ERTIFICATE OF COMPLIANCE	CE	11	VATION COMMISSION
nereby certify that the rules and r	egulations of the Oil Conservation	APPROVED SE	<u>P2 9 878 19</u>
emmission have been complied w	the and that the information given beat of my knowledge and belief.	Original Stones 1 and 1	
0.01		TITLE DEPUTY GREEN	
		11166	

(Signature)
Division Engineer

(Tule) 9/14/78

(Date)

A STATE OF THE STA

This form is to be filed in compliance with MULE 1104.

If this is a request for allowable for a newly drilled or despende well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with AULE 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.