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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

I. Operator
HUSKY OIL COMPANY OF DELEWARE
Address
BOX 380, CODY, WYOMING 82414
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)
CHANGE OF OPERATOR NAME

If change of ownership give name and address of previous owner
HUSKY OIL COMPANY

II. DESCRIPTION OF WELL AND LEASE

Lease Name EVENSEN	Lease No. (SF078004)	Well No. 3	Pool Name, including Formation ANGELS PEAK GALLUP	Kind of Lease State, Federal or Free
Location Unit Letter: G, 1765 Feet From The N Line and 1850 Feet From The E Line of Section 19 Township 27N Range 10W, NMPM, SAN JUAN County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> ROCK ISLAND OIL & REFINING COMPANY	Address (Give address to which approved copy of this form is to be sent) 321 W. Douglas, Wichita, Kansas					
Name of Authorized Transporter of Casinghead Gas <input checked="" 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) Box 1492, El Paso, Texas					
If well produces oil or liquids, give location of tanks.	Unit G	Sec. 19	Twp. 27N	Rge. 10W	Is gas actually connected? Yes	When March 1962

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.
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.		
Elevations (DE, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth		
Perforations						Depth Casing Shoe		
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT		
RECEIVED MAY 8 1969 OIL CON. COM. DIST. 3 SACKS CEMENT								

V. 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

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size

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.

W. C. Arnold
District Production Clerk
April 15, 1969
(Date)

OIL CONSERVATION COMMISSION
APPROVED
MAY 8 1969
BY: Original Signed by Emery C. Arnold
SUPERVISOR DIST. #9
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 logs taken on the well in accordance with RULE 111.
All portions of this form must be filled out completely for allowable on newly drilled or deepened wells.
This form, along with Rules I, II, III, and VI for changes of owner, well name, transporter, or other such change of condition, and Form C-104 must be filed for each pool in multiple copies.