#U. UF COPIES REC	1	د	
DISTRIBUTI			
SANTA FE	1		
FILE	1		
U.S.G.S.	1		
LAND OFFICE			
IRANSPORTER	OIL	1	
	GAS	1/	
OPERATOR			
PROPATION OF	7		

	SANTA FE		NEW MEXICO OIL CONSERVATION COMMISSION Form C-104 REQUEST FOR ALLOWABLE Supersedes 0			ld C-104 and C-11				
	U.S.G.S.	1	AND Effective 1-1-65			35				
	LAND OFFICE	AUTH	IORIZATION TO TR	RANSPOR	T OIL AND NATURAL	GAS				
	Lou	1,1	-							
	TRANSPORTER GAS	1/1	1							
	OPERATOR	1/	7							
. 1	PRORATION OFFICE	Y	1							
	Operator									
Energy Reserves Group, Inc.										
	Address									
	P. 0.	P. O. Box 3280, Casper, Wyoming 82601								
	New Well	Reason(s) for filing (Check proper box)  Other (Please explain)								
	Recompletion			in Transporter of:			•			
	Change in Ownership		Oil	Dry C	===	Name change fr	com Clinton Oil (	Company		
		<del></del> -	Casingh	Cond	ensate	<u> </u>				
	If change of ownership giv					<b>~</b>				
	and address of previous or	wner	·					<u> </u>		
11.	DESCRIPTION OF WEL	L AND	LEASE							
	Lease Name			Pool Name, Including	Formation	Kind of Lea	So	Lease No.		
	E. H. Pipkin		12	Basin	Dakota	State, Feder	ral or Fee Federal	SF078019		
	Location						rederat	151 070013		
	Unit Letter G	: 182	5 Feet Fre	om The North Li	ine and	1760 Feet From	The East			
				u.		. vet riom				
	Line of Section 12	Tow	mship	27N Range	11W	, NMPM,	San Juan	County		
	<b>D. D. C. C. C.</b>									
211.	DESIGNATION OF TRA	NSPORT	ER OF OIL	AND NATURAL G.	AS					
	l ,		of C	Condensate X	1	Give address to which appro				
	Giant Industries, Name of Authorized Transpor	Inc.	inghead Gas F	or Dry Gas	Box 256, Farmington, New Mexico 87401 Address (Give address to which approved copy of this form is to be sent)					
			_	] or Dry Gas Ly	1			7		
	Southern Union Ga		Unit Sec	. Twp. P.ge.	Fide	lity Union Tower		exas		
	If well produces oil or liquid give location of tanks.	8,	:		is gas ac		hen			
	Makin madunian in an ar				<u> </u>	yes				
v.	If this production is commi- COMPLETION DATA	ngied With	n that from ar	y other lease or pool,	give comm	ingling order number:		· · · · · · · · · · · · · · · · · · ·		
		, .	10	Oil Well Gas Well	New Well	Workover Deepen	Plug Back   Same Res	v. Diff. Res'v.		
	Designate Type of Co	ompletion	$\mathbf{n} = (\mathbf{X})$		į		1 1			
J	Date Spudded		Date Compl. F	leady to Prod.	Total Jap	erri	P.B.T.D.			
					I/R	fi.ti/el				
	Elevations (DF, RKB, RT, G	R, etc.j	Name of Produ	icing Formation	7 op O!1/0	85-14-1	Tubing Depth			
					V May					
	Perforations				"""	129 1976	Depth Casing Shoe	·		
					JOIL O	<b>1781</b>	1			
- 1	·			UBING, CASING, AN						
ŀ	HOLE SIZE		CASING	& TUBING SIZE		S E E H SE	SACKS CEME	ENT		
ŀ					<del> </del>					
ł				<del></del>	<del> </del>					
ŀ					<del> </del>		<del> </del>			
<b>.</b> .	TECT DATA AND DECA	ECT FO	D AT T OWA	n	<u> </u>		<del></del>			
٧.	TEST DATA AND REQU OIL WELL	ESTFO	R ALLOWA	BLE (Test must be a able for this de	fter recovery	of total volume of load oil	and must be equal to or ex	ceed top allow-		
Ī	Date First New Oil Run To To	anks	Date of Test			Method (Flow, pump, gas li	ft, etc.)	<del></del>		
- 1					1					
ı	Length of Test		Tubing Pressu	f•	Casing Pro	•88₩ <b>•</b>	Choke Size			
Γ	Actual Prod. During Test		Oil-Bble.		Water - Bbl	a.	Gas · MCF			
l		1			<u> </u>					
-										
_	GAS WELL									
	Actual Prod. Test-MCF/D		Length of Test		Bble. Cond	denegte/MMCF	Gravity of Condensate			
Ļ			3							
	Testing Method (pitot, back pi	·.)	Rubing Pressu	* (Shut-in )	Casing Pre	essue (Shut-in)	Choke Size	1		
L			· · · · · ·		<b></b>		<u> </u>			
I. (	CERTIFICATE OF COM	PLIANC	Ξ	ļ		OIL CONSERVA	TION COMMISSION			
	I hereby certify that the rules and regulations of the Oil Conservation Commission have been compiled with and that the information given above is true and complete to the best of my knowledge and belief.				APPROVED MAR 2 9 1976  ORIGINAL SIGNED BY N. E. MAXWELL, JF.  TITLE PETROLEUM MACTHER DIST. NO. 3  This form is to be filed in compliance with Rule 1104.					
Į										
•										
	Tevence L. Ruder									
					If th	nis is a request for allow	able for a newly drilled	or deepened		
	(Signature) District Clerk (Tule) March 25, 1976				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 sllowable on new and recompleted wells.					
_										
:										
-	naren					out only Sections I, II, is or number, or transports				
1		(Date	,	ŀ	l wan vec	in at transact or resusborn				

well name or number, or transporter, or other such change of condition. Senarate Forms C-104 must be filed for each pool in multiply