HO DE CODICE RECEIVES			5		
DISTRIBUTE					
SANTA FE					
FILE	1/				
U.S.G.S.		1			
LAND OFFICE					
IRAN PORTER	OIL	17			
	GAS	1			
OPERATOR		1			
PROBATION OFFICE					

## NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE

Form C=104 Supersedes Old C=104 and C=117

	FILE	7	NEWOES	AND	LOWABLE		Effective 1-1-	65
	U.S.G.S.	AUTHORIZAT	CION TO TI		T OIL AND N	ATUDAL CAC		
	LAND OFFICE	AOTHORIZAT	10/4 10 11	KANSI OK	I OIL MID N	ATORAL GAS		
	OIL /							
	IRAN PORTER GAS /	<del>-</del>						
	OPERATOR /	_					AP1 30-0	45-23749
,	PRORATION OFFICE						74 1 JU-U	77-43/73
1.	Operator					<del></del>		
	Southland Royalty C	ompany						
	Address	zan-pariy			<del></del>			<del>-</del>
	P O Drawer 570 F	Parminaton NM C	7401		•		•	
	P. O. Drawer 570, F Reason(s) for filing (Check proper be		7401	Other (Please explain)				
	New Well	Change in Transpo		_				
	Recompletion	Ci)	Dry (	Gas 📋				
	Change in Ownership	Casinghead Gas	Cond	densate				
								<u> </u>
	If change of ownership give name and address of previous owner							
11.	DESCRIPTION OF WELL AND	) LEASE						
	Lease Name	Well No. Pool Na	me, Including	Formation	к	ind of Lease		Lease No.
	Hanks	#11E Bas	in Dakot	a	18	Federal or For	X SF-07787	4
	Location							<i>*</i> 1
	Unit letter E . 134	45 Feet From The	North .	toe and	750	Cost Cost The	West	
	Unit Letter;;	reet riom ine	<u>roz dri</u> L	ine and	, 50	reet from the	West	
	Line of Section 7 To	ownship 27N	Range	9W	, NMPM,	San Juan		County
	Eme of Section 7	54113111P 2/14		200	, idealt les,	Sall Duall		County
	DECICL ACTION OF TRANSPOR	TOTAL AND N	4711041 0					
111.	DESIGNATION OF TRANSPOR				Give address to	which approved copy	of this form is t	o he sent!
	i _	ii or condensate	له					o ve sem)
	Plateau, Inc.					armington, N		
	Name of Authorized Transporter of Co		y Gas 🂢	!		uhich approved copy		o be sent)
	Southern Union Gathe	ering		P. O.	Box 1899,	Bloomfield,	NM 87413	
	If well produces oil or liquids,	Unit Sec. Tw	p. Ege.	ls gas act	ually connected?	When		
	give location of tanks.		1		N	o ¦		
	If this production is commingled w	with that from any other !	ease or pool	give comm	ingling order n	ımber:		
	COMPLETION DATA	ith that from any other is	case or poor,	, give commi	mgmig order in			
• • • •		Oil Well	Gas Well	New Well	Workover	Deepen Plug E	ack   Same Res	'v. Diff. Res'v.
j	Designate Type of Completi	ion - (X)	X	X	1 1	: 1	1	i
	Date Spudded	Date Compl. Ready to P	_ <del>_</del>	Total Dep	th	P.B.T	.D.	1
İ	10-19-79	•		71.	74'	710	10.1	
	Elevations (DF, RKB, RT, GR, etc.)	2-13-80 Name of Producing Form		Top O!1/G	<del></del>	712	Depth	<del></del>
		<b>1</b>	anon	ļ		ŀ		
	6564' GR	Basin Dakota		689	94'	714		
	Perforations			60041 6	0001	-	Casing Shoe	
	Lower Dakota: 7044'					717	2'	
l		TUBING,	CASING, AN	D CEMENT	ING RECORD			· <del>-</del>
[	HOLE SIZE	CASING & TUBI	NG SIZE		DEPTH SET		SACKS CEM	ENT
ŗ	12 1/4"	8 5/8"			226'	140	sacks	
ĺ	7 7/8"	5 1/2"			7172'	770	sacks	
		2 3/8"			7141'			
Ï				i 				
v	TEST DATA AND REQUEST F	OR ALLOWABLE (7	Test must be c	after recovery	of total volume	of load oil and must	be equal to or es	ceed top allow-
	OIL WELL	4	ble for this d	ep:h or be for	full 24 hours)			
-	Date First New Cil Bun To Tanks	Date of Test		Producing	Mathod (Flow, pr	imp, gas lift, eter)	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
1							TALLA	
ŀ	Length of Test	Tubing Pressure		Casing Pre	sawe	Ch.	WINT	\
i	·					1 200	1 [0]	1
-	Actual Pred. During Test	Oil-Bble.		Water - Bble		- ETB	22 100-	
1	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					91L CC	<i>``~ 1980</i>	1
ا		<u> </u>		<u> </u>		1 - 50	COM.	1
	0.4.0. W.T					\ DIS	ST. 3	•
_	GAS WELL	T		I BNIs Case	ensate/MMCF		of Condesate	
j	Actual Prod. Test-MCF/D	Length of Test		BDIS. COM	enadie/ wwc.h	0.1	or condition	
	1255	3 hours		<u> </u>	<del>`</del>			<del></del>
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-	in)	ł	naure (Shut-in	i		
Ĺ	Back Pressure	5		<u>  134</u>	<u> 17                                    </u>	3/4		
1. 0	CERTIFICATE OF COMPLIANC	CE			OIL CON	SERVATION (	COMMISSION	
	2 2 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3				£	ED 2 0 100	2∩	_
1	hereby certify that the rules and regulations of the Oil Conservation		APPROVED FER 2 0 1020					
(	Commission have been complied w	with and that the inform	ation given	Orig	inal Signed by	FRANK T. CHAVEZ		
	above is true and complete to the best of my knowledge and belief.		BY					
				SUPERVISOR DISTRICT # 3				
				This form is to be filed in compliance with MULE 1104.				
			If this is a request for allowable for a newly drilled or deepened					
-	District Production Manager			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 allow-				
_		(Title)		able on new and recompleted wells.				
	February 18, 1980				aut only Sact	tone III III en	d VI for chang	es of owner.
-	repruary 18, 1980			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.				
	,				rate Forms C	104 must be file	d for each por	d in multiply
	<b>!</b>			completed wells.				