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SANTA FE		$\prod I$	
FILE		1	
u.s.g.s.			
LAND OFFICE			<u> </u>
TRANSPORTER	OIL	1	<u> </u>
	GAS	1	<u> </u>
OPERATOR		3	
PRORATION OFFICE			
Operator			

## NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE

Form C-104 Supersedes Old C-104 and C-110

SANTA FE		OR ALLOWABLE	Effective 1-1-65	
FILE	AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS			
U.S.G.S.	AUTHORIZATION TO TRANS	SPORT OIL AND NATURAL GA	•	
OIL				
TRANSPORTER GAS (	•			
OPERATOR 3				
PRORATION OFFICE				
FOUR LAW TOYALT	A CC ANDA			
Address	ington New Yexico 874	01		
P. O. Drawer 570, Farm Reason(s) for filing (Check proper box)	ington, New Mexico 074	Other (Please explain)		
New Well	Change in Transporter of:			
Recompletion	Oil Dry Gas Castached Gas Condense	AA S GAAS		
Change in Ownership	Cusingeu ou			
If change give name A	ztec Oil & Gas Company,	P. O. Drawer 570, Farm	ington, New Merico 37401	
II. DESCRIPTION OF WELL AND LE	CASE	Tatlon   Kind of Lease	Leose No.	
Lease Name	Well No. Pool Name, Including For #20 Basin Dakota	State, Federal		
Reid	#20 Basin Bakota			
Location 'A 1030	Feet From The North Line	and 830 Feet From T	heEast	
Unit Letter A : 1030	<del></del>	•	San Juan County	
Line of Section 19 Towns	ship 28 North Range	9 West , NMPM,	Sali Suali County	
II. DESIGNATION OF TRANSPORTE	ER OF OIL AND NATURAL GAS	Address (Give address to which approv	ed copy of this form is to be sent)	
Name of Authorized Transporter of Off	or Condensate 💫	P O Box 108, Farmingt	on, New Mexico 87401	
Plateau, Inc. Name of Authorized Transporter of Casin	ghead Gas C c: Dry Gas A	Address (Give address to which approv	ed copy of this form is to be sent)	
Southern Union Gather	ing !	Fidelity Union Tower, I	Dallas, Texas 75201	
1	Unit Sec. Twp. P.ge.	Is gas actually connected? Whe		
give location of IGRES.	and the term of noof s	rive commingling order number:		
If this production is commingled with V. COMPLETION DATA		New Well Workover Deepen	Plug Back   Same Res'v.   Diff. Res'v.	
Designate Type of Completion	Oil wen	Wew Hell		
	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
			Tubing Depth	
Elevations (DF, RKB, RT, GR, etc.,	Name of Producing Formation	Top Oil/Gas Pay		
Perforations			Depth Casing Shoe	
Periorations				
	TUBING, CASING, AND	DEPTH SET	SACKS CEMENT	
HOLE SIZE	CASING & TUBING SIZE			
V. TEST DATA AND REQUEST FO	DALLOWARIE (Test must be gi	ter recovery of socal volume of load oil	and must be equal to or exceed top allow-	
OH WELL		pth or be for full 24 hours)   Producing Method (Flow, pump, gas li	ift, etc.)	
Date First New Oil Run To Tanks	Date of Test	Producting memory to the		
Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
Caudin or Lear		Water-Bbls.	Gas-MOF	
Actual Prod. During Test	Oil-Bala.	water - DB.B.		
GAS WELL		Bbls. Condensate/MMCF	Gravity of Condensate	
Actual Prod. Test-MCF/D	Length of Test			
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
		OU CONSERV	ATION COMMISSION	
L CERTIFICATE OF COMPLIANCE		1 13/3		
I hereby certify that the rules and regulations of the Oil Conservation		APPROVED Original Signed by A. A. Sendariok		
I hereby certify that the rules and to Commission have been complied we above is true and complete to the	with and that the information given the property of my knowledge and belief.	BY Original Signal		
above is true and complete to the		TITLE	· -F	
		to be filed in compliance with RULE 1104.		
	an Katha	If this is a request for all	owable for a newly drilled or deepened	
(Signature)		well, this form must be accomp	well, this form must be accompanied by a toballing the well in accordance with RULE 111.	
District	C 4 (4)	I am a stone of this form t	unat pe tilled out combietaly for allow-	
1 (Title)		II	M 0 1 1 2 ·	
	ile)	able on new and recompleted	wells.	
(D	tle) ate)	able on new and recompleted  Fill out only Sections I.	wells.  II, III, and VI for changes of owner, order, or other such change of conditionust be filed for each pool in multiply	