

DISTRIBUTION	
AMOUNT	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form O-104
Supersedes Old O-104 and C-110
Effective 1-1-65

ARL-30-045-23512

Operator CURTIS J. LITTLE	
Address P. O. Box 2487, Farmington, N.M. 87401	
Person(s) for filing (Check proper box)	
New Well ☒	Change in Transporter of:
Recompletion ☐	Oil ☐ Dry Gas ☐
Change in Ownership ☐	Casinghead Gas ☐ Condensate ☐

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Federal Com	Well No. #2-R	Pool Name, Including Formation Basin Dakota	Kind of Lease State, Federal or Fee Federal	Lease No. SF-078807-A
Location				
Unit Letter M	1085	Feet From The South	Line and 285	Feet From The West
Line of Section 12	Township 28 North	Range 13 West	NMPM, San Juan County	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒	Address (Give address to which approved copy of this form is to be sent)					
Caribou Four Corners, Inc.	P. O. Box 1528, Farmington, N.M. 87401					
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒	Address (Give address to which approved copy of this form is to be sent)					
El Paso Natural Gas Company	Box 990 - Farmington, N.M. 87401					
If well produces oil or liquids, give location of tanks.	Unit M	Sec. 12	Twp. 28N	Rec. 13W	Is gas actually connected? No	When September 1979

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'tv. ☐	Diff. Res'tv. ☐
Date Spudded 7-27-79	Date Compl. Ready to Prod. 8-27-79		Total Depth 6154'		P.B.T.D. 6120'			
Elevations (DF, RAE, RT, GR, etc.) 5648 KB	Name of Producing Formation Dakota		Top Oil/Gas Pay 5988'		Taking Depth 6070'			
Perforations 5988-97, 6012-18, 6076-85					Depth Casing Shoe 6153'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE 12-1/4	CASING & TUBING SIZE 8-5/8		DEPTH SET 163'		SACKS CEMENT 100 SX			
7-7/8	4-1/2		6153'		910 SX			

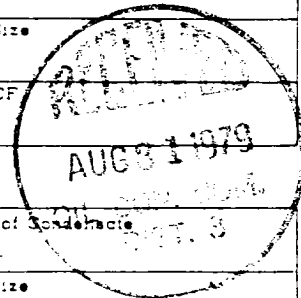
V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(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	Testing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test - MMCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
1120	5 hours	spray	--
Testing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
1052 psig	1360 psig	3/4"	



VI. CERTIFICATE OF COMPLIANCE

I, the undersigned, certify that the information given is true and correct to the best of my knowledge and belief.

Curtis J. Little

APPROVED _____
BY Original Signature _____
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 tests taken on the well in accordance with RULE 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.