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## NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE AND

Form C-104
Supercedes Old C-106 and C-110
Elioctive 1-1-65

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

PATON OFFICE			
BHP Petroleum (Ame	ericas), Inc.		
P.O. Box 3280, Cas	sper. WY 82602		
an(s) for liling (Check proper box)	·	Other (Please explain)	
we!s	Change in Transporter of:		
impletion	OII Dry Gas	77	
ige in Ownership			
inge of ownership give name El ddress of previous owner	nergy Reserves Croup, Ind	c., P.O. Box 3280, Cas	per, WY 82602
CRIPTION OF WELL AND	Well No., Pool Name, Including Fo	ormation   Kind of Le	936
allegos Canyon Unit	320 West Kutz-Pict		eral or Fee Federal I-149 Ind-8470
nit Letter I : 185	O Feet From The <u>South</u> Lin	and 820 Feet Fro	om The East
ine of Section * 30 To-	vaship 28N Range 11	<sub>ЭW</sub> , ммгм, Sa	n Juan
			Il Juan County
IGNATION OF TRANSPORT e of Authorized Transporter of Cit	TER OF OIL AND NATURAL GA	Againss (Give address to which ap	proved copy of this form is to be sent)
e of Authorized Transporter of Cas		i .	proved copy of this form is to be sent)
El Paso Natural Gas	Unit Sec. Twp. P.gs.	P.O. Box 990. Farmi	ngton, NM 87401
location of tanks.	1 1 1 1	Yes	<u> </u>
s production is commingled with IPLETION DATA	th that from any other lease or pool,	give commingling order number:	
Designate Type of Completion	on — (X) Oil Well Gas Well	New Well Workover Deepen	Plug Bacx   Same Res'v. Diff. Res'v.
Spudded	Date Campi. Recay to Prod.	Total Depth	P.3.T.D.
cations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top OH/Gas Pay	Tubing Depth
orations		!	Depth Casing Shoe
	THRING CASING AND	CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
	1		
ST DATA AND REQUEST F WELL	OR ALLOWABLE (Test must be a sble for this de	fter recovery of total volume of load option of the state	oil and must be equal to or exceed top allow-
First New Cil Run To Tonks	Date of Test	Producing Method (Flow, pump, ga	is lift, etc.)
gtn of Test	Tubing Pressure	Cosing Pressure	Chosesia
ual Prod. During Teet	CII-Bbia.	Water-Bbla.	Ga- MEP 2 7 1000
•			011 633
S WELL			CIL GON. DIV
ugi Prod. Teet-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity di Odna and ate
ting Method (pitot, back pr.)	Tubing Pressure (Shat-in)	Caeing Preseure (Shut-in)	Choke Size
RTIFICATE OF COMPLIAN	CE		RVATION COMMISSION
the manifestable show that and	regulations of the Oil Conservation	APPROVEDSET	27 1985
minutes have been complied t	with and that the information given	BY	- (Q)
e is true and complete to the best of my knowledge and belief.		CHERVISOR	DISTRICT B
	$\bigcap$ $\bigcap$		
Kole Welder		If this is a request for a	In compliance with RULE 1104.
•	ature)	well, this form must be accordent taken on the well in a	mpanied by a tabulation of the deviction
District (7)	ile)		a must be filled out completely for allow-
9-,	19-85	Fill out only Sections	I. H. III. and VI for changes of owner.
(Dete)		well name or number, or trans	parter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.