Form C-104 Revised 10-1-78

NERGY AND MINERALS DEPARTMENT

HOI MAD MINACH	750		
#0. 07 COPIES HEC			
DISTRIBUTION			
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			

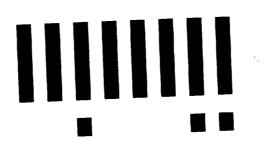
1.

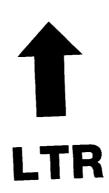
OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

· NATURE OF THE PERSON OF THE

REQUEST FOR ALLOWABLE AND

Mims State Com 1-A Blanco Pictured Cliffs State, Federal or FeeState B-108 Location Unit Letter D : 925 Feet From The North Line and 855 Feet From The West	OPERATOR AUTHORIZATION TO TRANSP						ND NATUR	RAL GAS					
P. O. Box 2179 Farmington, NM 37499 Resund(s) for filing (Caste proper bos) Naw Well Recompletion Oil Castropheed Gas Condensate Castropheed Gas Castr	Ope		rn Unio	on Exploration Company									
Reconsolistion Change in Transporter of: Oil Dry Osa Change in Ownership Castopheed Gas Dry Osa Candensolis Dry Osa	Add	Address											
Name Charge	Rec						_		explain)				
Contemporary III Change of commercial give name and address of previous owner. 1. DESCRIPTION OF WELL AND LEASE Lease Nove Mins State Com 1-A 1-Bell No. Fool Name, including Formation Wall No. Fool Name, including Formation Lease Nove Mins State Com 1-A Lease Nove Mins State Com 1-A 1-Bell No. Fool Name, including Formation Lease Nove Mins State Com 1-A 1-Bell No. Fool Name, including Formation Unit Letter D: 925 Feet From The North Line and 855 Feet From The West Line of Section 1-Bell No. Fool Name of North North North North San Juan Co Nord of Authorized Transporter Of Oil And North Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter Of Oil Or Condensets (Di P. O. Box 1420 Bloomfield, NM 87413 Conoco Inc., Surface Transportation Sunterra Gas Cathering Company It well preduces oil or liquids, Unit Sec. Twp. Rge. Is gos actually connected? When If this production is commingled with that from any other lesse or pool, give commingling order numbers: If this production is commingled with that from any other lesse or pool, give commingling order numbers: If this production is commingled with that from any other lesse or pool, give commingling order numbers: If this production is commingled with that from any other lesse or pool, give commingling order numbers: To Doir Spudded Doir Frank Off, RAB, RT, CR, etc., Name of Producing Formation Top Oil/Gas Pay Tubing Depth Despit Casing Book TUBING, CASING, AND CEMENTING RECORD Doir First New Oil Run To Tents Doir of Sec. The Sec. T		$\overline{\Box}$		•	Transporter of		1 1	Name C	hange				
DESCRIPTION OF WELL AND LEASE Lease Name Well No. Fool Name, Including Formation State Com 1-A Blanco Pictured Cliffs State, Federal or FeeState B-108	1	· —	_	_	ad Gas	-	77					<u>.</u>	
I. DESCRIPTION OF WELL AND LEASE Well No. Pool Name, Including Formation Kind of Lease Lease Name Well No. Pool Name, Including Formation Kind of Lease Lease Mims State Com 1-A Blanco Pictured Cliffs Stote, Federal or FeeState B-108 Location Location D 925 Feet From The North Line and 855 Feet From The West Line of Section 16 Township 29 North Range 9 West NMPM, San Juan Co	If ci	hange of ownership giv	ve name										
Ministrate Part P													
Mims State Com			LL AND I	Well No.	Pool Name, In	cluding Fo	ormation		Kind of Lease			Lease No.	
Line of Section 16 Township 29 North Range 9 West NMPM, San Juan Co			Com	1-A				- [State, Federal	or FeeSta	ite	B-10870-6	
Line of Section 16 Township 29 North Range 9 West , NMPM, San Juan Co 1. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Nome of Authorised Transporter of Oil of Condensate (A) Address (Give address to which approved copy of this form is to be sent) CONOCO Inc., Surface Transporter of Oil or Condensate (A) P. O. Box 120 Bloomfeld (NM 87m1 is to be sent) Name of Authorised Transporter of Cosingheed Gas or Dry Gas (X) P. O. Box 120 Bloomfeld (NM 87m1 is to be sent) Name of Authorised Transporter of Cosingheed Gas or Dry Gas (X) Address (Give address to which approved copy of this form is to be sent) Name of Authorised Transporter of Casingheed Gas or Dry Gas (X) Address (Give address to which approved copy of this form is to be sent) Name of Authorised Transporter of Casingheed Gas or Dry Gas (X) Address (Give address to which approved copy of this form is to be sent) Name of Authorised Transporter of Casingheed Gas or Dry Gas (X) Address (Give address to which approved copy of this form is to be sent) Name of Authorised Transporter of Casingheed Gas or Dry Gas (X) Address (Give address to which approved copy of this form is to be sent) Name of Authorised Transporter of Casingheed Gas (Give address to which approved copy of this form is to be sent) Name of Authorised Transporter of Casingheed Gas (Give address to which approved copy of this form is to be sent) Name of Authorised Transporter of Casingheed Gas (Give address to which approved copy of this form is to be sent) Name of Authorised Transporter of Casingheed Gas (Give address to which approved copy of this form is to be sent) Name of Authorised Transporter of Casingheed Gas (Give address to which approved to which approve		eation		25 Feet Fro	m The <u>NO</u> T	th Line	and 8!	55	_ Feet From T	he West			
Name of Authorized Transporter of Oil								, имрм,	San J	Juan		County	
Name of Authorized Transporter of Oil		STATION OF TR	ANCDORT	ED OF OU	AND NATE	RAT. GA	s						
Sunterra Gas Gathering Company Sunterra Gas Gathering Company If well produces oil or liquids, give location of tanks. If this production is commingled with that from any other lease or pool, give commingling order number: COMPLETION DATA Designate Type of Completion — (X) Date Spudded Date Compl. Ready to Prod. Date Spudded Date Compl. Ready to Prod. Total Depth P.B.T.D. Designate Type of Completion — (X) Date Spudded Date Compl. Ready to Prod. Total Depth P.B.T.D. Tubing Depth Perforations TUBING, CASING, AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL Date First New Oil Run To Tanks Date of Test Tubing Pressure Casing Producing Method (Flow, pump, gas liff, etc.) Casing Producing Method (Flow, pump, gas liff, etc.) OIL Casing Size OIL Casing Producing Method (Flow, pump, gas liff, etc.) OIL Casing Producing Method (Flow, pump, gas liff, etc.) OIL Casing Producing Method (Flow, pump, gas liff, etc.) OIL Casing Producing Method (Flow, pump, gas liff, etc.) OIL Casing Producing Method (Flow, pump, gas liff, etc.) OIL Casing Producing Method (Flow, pump, gas liff, etc.) OIL Casing Producing Method (Flow, pump, gas liff, etc.) OIL Casing Producing Method (Flow, pump, gas liff, etc.) OIL Casing Producing Method (Flow, pump, gas liff, etc.) OIL Casing Producing Method (Flow, pump, gas liff, etc.) OIL Casing Producing Method (Flow, pump, gas liff, etc.) OIL Casing Producing Method (Flow, pump, gas liff, etc.) OIL Casing Producing Method (Flow, pump, gas liff, etc.) OIL Casing Producing Method (Flow, pump, gas liff, etc.) OIL Casing Producing Method (Flow, pump, gas liff, etc.) OIL Casing Producing Method (Flow, pump, gas liff, etc.) OIL Casing Producing Method (Flow, pump, gas liff, etc.) OIL Casing Producing Method (Flow, pump, gas liff, etc.)	I. DE	me of Authorized Transpo	orter of OII	or C	ondensate 🗴		Address (Cit						
Sunterra Gas Gathering Company If well produces oil or liquids, Unit Sec. Twp. Rgs. Is gas actually connected? When When give location of tanks. If this production is commingled with that from any other lease or pool, give commingling order number: // COMPLETION DATA Designate Type of Completion — (X) Date Spudded Date Compl. Ready to Prod. Date Spudded Date Compl. Ready to Prod. Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation Tubing Casing, AND CEMENTING RECORD Tubing Depth Set TUBING, CASING, AND CEMENTING RECORD TUBING CASING & TUBING SIZE DEPTH SET SACKS CEMENT TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL Date First New Oil Run To Tanks Date of Test Producing Method (Flow, pump, gas lift, etc.) Size Casing Producing Method (Flow, pump, gas lift, etc.)	1	Conoco Inc., Su	urface T	ransporta	tion or Dry Ga	s (文)	P. O. Bo	ox 1420 ve address to	BLOOMILE o which approv	ed copy of t	8/413 his form is to	o be sent)	
If well produces oil or liquids, give location of tanks. If this production is commingled with that from any other lease or pool, give commingling order number: If this production is commingled with that from any other lease or pool, give commingling order number: If this production is commingled with that from any other lease or pool, give commingling order number: If this production is commingled with that from any other lease or pool, give commingling order number: If this production is commingled with that from any other lease or pool, give commingling order number: COMPLETION DATA Date Completion											M 8712	5	
If this production is commingled with that from any other lease or pool, give commingling order number: // COMPLETION DATA Oil well Gas well New Well Workover Deepen Plug Back Same Res*v. Diff.	11 1	well produces oil or liqui			Twp.	Rge.	Is gas actua	lly connecte	d? , whe	n			
Designate Type of Completion — (X) Date Spudded Date Compl. Ready to Prod. Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation Top Oil/Gas Pay Tubing Depth Depth Casing Shoe TUBING, CASING, AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL Date First New Oil Run To Tanks Date of Test Length of Test Tubing Pressure Casing Producing Method (Flow, pump, gas lift, etc.) Actual Prod. During Test Oil Bbis. Oil Bbis. Oil Casing Producing Method (Flow, pump, gas lift, etc.)	If th	nis production is comm	ningled with	h that from an	y other lease	or pool,	give commin	gling order					
Date Spudded Date Compil. Ready to Prod. Total Depth P.B.T.D. Tubing Depth Tubing Depth Depth Casing Shoe TUBING, CASING, AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL Date First New Oil Run To Tanks Date of Test Length of Test Tubing Pressure Casing Pres			Completion		Oil Well G	as Well	New Well	Workover	Deepen	Plug Back	Same Res	'v. ' Diff. Res'v.	
Perforations TUBING, CASING, AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT SACKS CEMENT TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL Date First New Oil Run To Tanks Date of Test Length of Test Tubing Pressure Casing Producing Method (Flow, pump, gas lift, etc.)					leady to Prod.		Total Depth	i		P.B.T.D.	<u> </u>		
TUBING, CASING, AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL Date First New Oil Run To Tanks Date of Test Tubing Pressure Casing Pressure Casing Pressure Casing Pressure Casing Pressure Casing Pressure OIL Disi. 3 Gas-MCF Disi. 3 Gas-MCF Disi. 3 Gas-MCF Gravity of Condensate	Ele	Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation			n	Top Oil/Gas Pay			Tubing Depth				
TUBING, CASING, AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed together of the depth or be for full 24 hours) OIL WELL Date First New Oil Run To Tanks Date of Test Length of Test Tubing Pressure Casing Producing Method (Flow, pump, gas lift, etc.) Length of Test Actual Prod. During Test OIL DIST. 3 Gas-MCF DIST. 3 Carryity of Condensate							Depth Casing Shoe						
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT	Per									<u> </u>			
TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top able for this depth or be for full 24 hours) OIL WELL Date First New Oil Run To Tanks Date of Test Casing Producing Method (Flow, pump, gas lift, etc.) Length of Test Tubing Pressure Casing Producing Method (Flow, pump, gas lift, etc.) Actual Prod. During Test Oil Bbls. Water-Bbls. MAY 2 8 1387 Gas-MCF DIST. 3 GAS WELL DIST. 3 Gravity of Condensate		CARNO A TURING 6175							SACKS CEMENT				
OIL WELL Date First New Oil Run To Tanks Date of Test Length of Test Tubing Pressure Casing Pressure Casing Pressure Casing Pressure Water-Bbis. MAY 2 8 1587 Gas-MCF DIST. 3 Grayity of Condensate	-				31ZE	52.1							
OIL WELL Date First New Oil Run To Tanks Date of Test Length of Test Tubing Pressure Casing Pressure Casing Pressure Casing Pressure Water-Bbis. MAY 2 8 1587 Gas-MCF DIST. 3 Grayity of Condensate													
OIL WELL Date First New Oil Run To Tanks Date of Test Length of Test Tubing Pressure Casing Pressure Casing Pressure Casing Pressure Water-Bbis. MAY 2 8 1587 Gas-MCF DIST. 3 Grayity of Condensate				<u> </u>						<u> </u>			
Date First New Oil Run To Tanks Length of Test Tubing Pressure Casing Producing Method (F. 10.5) Size Casing Producing Method (F. 10.5) Size Casing Producing Method (F. 10.5) Size May 2.8 987 Gas-MCF OIL CON. 987 Grayity of Condensate		OIL WELL able for this dep						lepth or be for full 24 hours)					
Length of Test Tubing Pressure Water-Bbis. MAY 2 8 587 Gas-MCF OIL CON. 98Ve DIST. 3 Grayity of Condensate	Da	Date First New Oil Run To Tanks Date of Test			Producing M	ethod (Flow	, pump, gas (1)						
Actual Prod. During Test Oil-Bbis. Water-Bbis. MAY 2 8 1987 Gas-MCF OIL CON. Div. DIST. 3 Grayity of Condensate	Length of Test			Tubing Press	ure		Casing Pro	aure.		Chore Si	•		
GAS WELL OIL COM. DIV. DIST. 3 Gravity of Condensate					Water - Bbls.	NAY	28 1987	Gas - MCF					
GAS WELL DIST. 3	Ac	Actual Prod. During Test Oil-Bbis.				IVIA I	A 6 2 5 2 1	<u></u>					
GAS WELL Grayley of Condensate	! _							OIL C		₹•}			
				Length of Tes	ıt		Bbis. Conde			Gravity o	Condensate		
Choke Size				Tubing Press	we (Shut-in)	<u> </u>	Casing Pres	sure (Shut-	-in)	Choke Siz	:•	<u></u>	
lesting Method (phios, secta pri)	Te	eting Method (pitot, back	k pr./	1 abing Piess						ICAL DIV	ICION		
CERTIFICATE OF COMPLIANCE OIL CONSERVATION DIVISION MAY 268 19	. CE						DNSERVA	אוט אטו	MΔY 🎺	A 1987_			
I hereby certify that the rules and regulations of the Oil Conservation	I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.			APPROVED		Srank X							
Division have been complied with and that the best of my knowledge and belief. SUPERVISOR DISTRO				BY			<u> </u>	SUPERVISOR	DISTRIC # 4				
TITLE		Enely, Raglise			11			••					
					This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or despendently the deviation of the deviation.								
well, this form must be accompanied by a tabulation of the well in accordance with RULE 111.						well, this	en on the	be accompa well in acco	nied by a dance with	NULE 11	1.		
Office Supervisor All sections of this form must be filled out completely for		Offic	Office Supervisor			All sections of this form must be filled out completely for allow-							
May 26, 1987 Fill out only Sections I, II. III, and VI for changes of well name or number, or transporter, or other such change of con	(Title) May 26, 1987			101			ii abla on s	new and re	I every and 37 for changes of owner,				
(Date) Well name or number, or transported to the filed for each pool in m Completed wells.		May	•	-			able on s	new and re	• •	777	VI for cha	nges of owner, ge of condition	







Job separation sheet

STATE OF NEW MEXICO

ENERGY AND MINERALS DEPARTMENT

HOT AND WILLIAE	MLS L	JEPA	AH I I
(*1460		
DISTRIBUTI			
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			

OIL CONSERVATION DIVISION P. O. BOX 2088

Form C-104 Revised 10-1-78

SANTA FE, NEW MEXICO 87501

	U.S.G.S. LAND OFFICE TRANSPORTER OIL GAS OPERATOR		OR ALLOWABLE AND SPORT OIL AND NATI	JRAL GAS				
1.	Operator Southern Union	Exploration Company		<u></u>	·			
	Address P. O. Box 2179							
	Reason(s) for filing (Check proper box	,,	Other (Pleas	e explain)				
	New Well	Change in Transporter of:						
	Recompletion Change in Ownership	Oil Dry G Casinghead Gas Conde	ensate X			· · · · · · · · · · · · · · · · · · ·		
	If change of ownership give name and address of previous owner			-				
u.	DESCRIPTION OF WELL AND Legae Name Mims State Com	Well No. Pool Name, Including I		Kind of Leas		Lease No.		
	Location Pilitis State Cont	1-A Blanco Mesa	verde	State, Federa	or Fee State	B-10870-6		
	Unit Letter D : 925	Feet From The N Li	ne and <u>855</u>	Feet From	The W			
	Line of Section 16 To	wnship 29N Range	9W , NMPN	4. San J	uan	County		
u.	DESIGNATION OF TRANSPOR		AS Address (Give address	to which approv	ved copy of this form is	to be sent)		
	The Mancos Corporation	n X	P. O. Box 1320	Farming	ton, NM 87499)		
	Name of Authorized Transporter of Cas	singhead Gas or Dry Gas	Address (Give address					
	Sunterra Gas Gather: If well produces oil or liquids, give location of tanks.	ing Company	P. O. Box 26400 Albuquerque, NM 87125 Is gas actually connected? When					
	this production is commingled with that from any other lease or pool, give commingling order number:							
	Designate Type of Completion	on - (X)	New Well Workover	Deepen	Plug Back Same Re	es'v. Diff. Res'v.		
	Date Spudded	Date Compl. Ready to Prod.	Total Depth		P.B.T.D.			
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay		Tubing Depth			
	Perforations	Depth Casing Shoe						
	-	TUBING, CASING, AND	CEMENTING RECOR	D	<u> </u>			
	HOLE SIZE	DEPTH SE	£T	SACKS CEMENT				
v.	TEST DATA AND REQUEST FO	OR ALLOWABLE (Test must be a	fter recovery of total volu		and must be equal to or	exceed top allow		
	OIL WELL Date First New Oil Run To Tanks	able for this de	pth or be for full 24 hours Producing Meffed (Flow	·	i, etc.)	:		
	Length of Test Tubing Pressure		Casing Process		Choke Size			
		Oil-Bhis.	Water-Bble. SFP 2		Galiner			
	Actual Prod. During Test	Oit-Bbis.	OH	< 3 /987	U			
	GAS WELL		Vic	IV. DIV	,			
ſ	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	. 3	Gravity of Condensate	<u></u>		
-	Testing Method (pitat, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-	in)	Choke Size			
I. (CERTIFICATE OF COMPLIANC	E	OIL CO	NSERVATI	ON DIVISION	r .		
1	hereby certify that the rules and re	APPROVED	SEP	<u>23 1987 </u>	. 19			
•	Division have been complied with a bove is true and complete to the	BY	a	· · /				
•	nove to time and combiers to rue		Donat 1.	- "	•			
			TITLE SUPERVISION DISTRICT # 5 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.					
	V// 0. 11.0 1/5	۲, ,						
_	(Signate	me)						
	Drilling & Proc	1						
-	(Title		All sections of this form must be filled out completely for allowable on new and recompleted wells.					

Sept. 21, 1987

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