C						
. HO. OF FOMILE BALLETS						
DETRIBUTION						
SANTAFIL						
FILE			-			
U.S.G.S.						
LAND OFFICE		_				
TRAIL PORTER	OIL					
	GAS					
OPERATOR						
PRORATION OFFIC	:E					
Operator						
SOUTHLAND ROY	YALTY	COM	ΙP			
Address						
P. O. DRAWER						
Reason(s) for filing (C)	beck pro	per bo	×,			
New Well	<u>[</u> ]					
Becompletion						

December 6, 1982

(Date)

	SANTA FE.  SANTA FE.  FILE  U.S.G.S.  LAND OFFICE  TRAIL PORTER  GAS  OPENATOR	REQUEST	CONSTRVATION COMMISSION TEOR ALLOWABLE AND RANSPORT OIL AND NATUI	Supersedes Old C-104 and C-1 Lithative 1-1-65	
ı.	PRORATION OFFICE				
	SOUTHLAND ROYALTY COM	PANY			
P. O. DRAWER 570, FARMINGTON, NEW MEXICO 87499					
	Reason(s) for filing (Check proper box		Other (Please explain	)	
	New Well &X	Charige in Transporter of:  CII Dry G	sas		
	Change in Ownership	Casinghead Gas Conde	ensate		
	If change of ownership give name and address of previous owner		· ·	· .	
11.	I. DESCRIPTION OF WELL AND LEASE			S. A. T. A. C.	
	Lease Name CAT DRAW	Well No. Pool Name, Including F		Lease No.	
	Location	1E   BASIN DAKOTA	State, I	Federal or Fee FEDERAL NM-4456	
	Unit Letter C : 860	Feet From The North Li	ne and <u>1770</u> Feet	From The West	
	Line of Section 4 To	waship 30N Range	5W , NMPM,	Rio Arriba County	
117.	DESIGNATION OF TRANSPORT	FER OF OU AND NATURAL C.			
•	Name of Authorized Transporter of Oil	or Condensate M		approved copy of this form is to be sent)	
	Plateau. Inc.	singhead Gas or Dry Gas 📆		., NE, Albuquerque, NM 87110	
	Northwest Pipeline Cor	<del></del>		ngton, New Mexico 87401	
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge.	Is gas actually connected?	, When	
	If this production is commingled wit	h that from any other lease or pool,	give commingling order number	:	
1₩.	Designate Type of Completion	Oil Well Gas Well	New Well Workover Deep	en Plug Back Same Restv. Diff. Restv.	
	Date Spuaded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
	8-3-82	11-3-82	8035 '	7983'	
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation Dakota	Top 011/Gas Pay 7880 1	Tubing Depth 7952'	
	Perforations 7880'-7974'		Depth Casing Shoe 8033 '		
	7000 7374	TUBING, CASING, AND	D CEMENTING RECORD	8033	
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
ļ	12-1/4" 7-7/8"	9-5/8" 5-1/2"	527.90' 8033'	312 cu.ft. 1769 cu.ft. (3 stages)	
	7-7/8	1-1/2	7952	Packer set at 5935'	
į		/		40.01 300 40 0300	
	TEST DATA AND REQUEST FOOIL WELL		fter recovery of total volume of loa pth or be for full 24 hours)	d oil and must be equal to or exceed top allow-	
1	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)		
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
}	Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	Gae - MCF	
ĺ				<u> </u>	
	GAS WELL				
Ī	Actual Prod. Test-MCF/D	Length of Teet	Bbls. Condensate/MMCF	Gravity of Condensate	
-	1264 MCF/D Testing Method (pitot, back pr.)	3 hours Tubing Pressure (shut-in)	Casing Pressure (Shut-in)	Choke Size	
Ĺ	Back Pressure	2469		3/4"	
This form is to be filed in compliance  If this is a request for allowable for a		T3 1362			
		20 Trank J. C. Lung			
		<del> </del>	SUPLEM OR DISTRICT # 3		
		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			
-	Signal	urie)	well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.		
-	Secretary (Title	•/	All sections of this form	must be filled out completely for allow-	

able 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.

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