

48-000, Aztec, N.M.

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GASForm O-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

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FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	1
	GAS	
OPERATOR		1
PRORATION OFFICE		

I. Operator  
Southwest Production Company  
Address  
P. O. Box 400, Aztec, New Mexico 87410  
Reason(s) for filing (Check proper box)  
New Well ☐ Change in transporter ☐  
Recompletion ☐ ☒ Dry Gas ☐  
Change in Ownership ☐ Gashead Gas ☐ Condensate ☐  
Other (Please explain)  
From Four Corners Pipeline to Giant Refinery, Inc.

If change of ownership give name  
and address of previous owner

## II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.	
Callow Fed.	1	Totah Gallup (Dual)	State, Federal or Fee Fed.	SFO78931-D	
Location					
Half Section	I	1841	Section	3	
Line of Section	33	Township	29N	Range	13W
N.M.P.M., San Juan County					

## III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)			
Giant Refinery, Inc., Suite 238, Petroleum Plaza Bldg., 3535 30th St., Farmington, N.M. 87401				
Name of Authorized Transporter of Gashead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)			
If well produces oil or liquids, give location of tanks.	Sec. 33	Twp. 29N	Range 13W	Is gas naturally connected? When

If this production is commingled with that from any other lease or pool, give commingling order number:

## V. COMPLETION DATA

Designate Type of Completion - (X)	Drill	Re-drill	Re-work	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded	Date Comp. Ready to Prod.	Total Depth		F.B.T.D.				
Elevations (DE, RKB, RI, GR, etc.)	Name of Driller or Permittee	Total Cost		Tubing Depth				
Perforations	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

(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	Production Method (Flow, pump, gas lift, etc.)	
Length of Test	Casing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

## GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

## CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

J. P. Crum Jr.  
(Signature)

Production Manager

(Title)

8/2/78  
(Date)

## OIL CONSERVATION COMMISSION

APPROVED AUG 8 1978, 19

BY Original Signature of A. A. Kendrick

SUPERVISOR DIST. #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 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.