

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

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

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 1
 TRANSPORTER OF GAS 1
 OPERATOR 2
 REGISTRATION OFFICE

Suburban Propane Gas Corp.

2120 Alamo National Bldg.; San Antonio, Texas 78205

Reason for filing (Check one per box)	Other (Please explain)
<input type="checkbox"/> Change in Transporter of: <input type="checkbox"/> Oil <input checked="" type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate	

If change of ownership give name and address of previous owner

II DESCRIPTION OF WELL AND LEASE

Lease Name NW Cha Cha Unit 21	Well No. 42	Well Name, including Formation Cha Cha Gallup	Kind of Lease State, Federal or Fee Federal	14-20-608 2199
Section H	Feet From The 1650	Line and N	Feet From The 990	E
Line of Secs. 21	Township 29N	Range 14W	San Juan County	

III DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Approved 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)
Plateau, Inc.	Box 108; Farmington, N. M.
Approved Transporter of Casinghead 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 produced oil or gas, give location of tanks. Unit G Sec. 21 Twp. 29N Rge. 14W	Is gas actually connected? no When

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'v.	Diff. Res'v.
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
Elevation (FEET RKB, RL, CR, 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					

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	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - Bbls.
GAS WELL			
Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pump, back prod)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

VI 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.

(Signature)

 (Title)
 10-1-73

OIL CONSERVATION COMMISSION

APPROVED OCT 2 1973, 19
 BY Original Signed by Emery C. Arnold
 TITLE SUPERVISOR DIST. #3

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.

