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. or compa occure			L		
DISTRIBUTION	NEW MEXICO OIL CONSERVATION COMMISSION DECLIEST ECO ALLOWARIE 1 3-110				
NTA FE REQUEST FOR ACCUMANCE					
LE	AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GA'				
S.G.S.	AUTHORIZATION TO TRANSF	ORT OIL AND NATURAL GA	•		
OIL					
RANSPORTER GAS					
PERATOR					
RORATION OFFICE		207			
BHP Petroleum (Amer:	icas), Inc.				
P.O. Box 3280, Casp	er, WY 82602				
eason(s) for liling (Check proper box)		Other (Please ands)			
ew Welt	Change In Transporter of:				
ecompletion	OII Dry Gas	<u>.</u> H1	·		
hange in Ownership X	Casinghead Gas Condensate	_ =			
change of ownership give name Ene d address of previous owner	rgy Reserves Group, Inc.	, P.O. Box 3280, Casper	-, WY 82602		
ESCRIPTION OF WELL AND LE	ASE				
ease Name	Well No. Post Name, merading total	1	or Fee Fee NM 215		
Gallegos Canvon Unit	307 West Kutz-Pictur	ed office	of the Tee		
L 1455	Feet From The South Line of	ndFeet From T	West		
Unit Letter •30 Towns	20N _ 1	2W NMPM San	Juan County		
Line of Section	The state of the s				
ESIGNATION OF TRANSPORTE	R OF OIL AND NATURAL GAS	vadress (Give address to which approv	ed copy of this form is to be sent)		
Name of Authorized Transporter of OII	or Condensate	agaress force appress to which approv	,		
- Cook	anead Gas Tor Dry Gas A	Address (Give address to which approv	ved copy of this form is to be sent)		
Name of Authorized Transporter of Casin					
El Paso Natural Gas (Unit Sec. Twp. P.gs. I	P.O. Box 990. Farming s gas actually connected? whe	en OJ 401		
If well produces oil or liquids,		Yes			
give location of tanks.	that from one other lease or pool gi	ve commingling order number:			
this production is commingled with	that from any other lease or pool, gi	ve commissing order			
COMPLETION DATA		New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.		
Designate Type of Completion		1 1			
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top 04/Gas Pay	Tubing Depth		
			Depth Casing Shoe		
Perforations					
	TUBING, CASING, AND	CEMENTING RECORD			
	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
HOLE SIZE	CASING & FORMS				
TEST DATA AND REQUEST FO	RALLOWABLE (Test must be aft	er recovery of total valume of load oil	l and must be equal to or exceed top allow-		
ou WELL	able for this dep	th or be for full 24 hours) Producing Method (Flow, pump, gas l			
Date First New Cil Run To Tanks	Date of Test	Producing Method (Fibm, Pamp, 203			
		Casing Pressure	CHANGE OF THE PARTY OF THE PART		
Length of Test	Tubing Pressure	Cabing 11000	SEDO		
	Oil-Bhis.	Water - Bbls.	Gas MCF 271985		
Actual Prod. During Test	/		OIL COLL		
			NEIV DIV		
	DiST. 3				
Actual Prod. Test-MCF/D	Length of Test	Bbis. Condensate/MMCF	Gravity of Condensate		
Actual Free Free Mary			Challe Circ		
Teeting Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shat-in)	Choke Size		
CERTIFICATE OF COMPLIANCE	CE	OIL CONSERV	ATION COMMISSION		
1 - 10 <u>10 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 </u>					
hereby certify that the rules and regulations of the Oil Conservation APPROVED					
Commission have been compiled with and my knowledge and helief. By			Xau		
ji V			SUPERVISOR DISTORT 開 3		
		TITLE			

Dale Bellen	
(Signature)	
District Clerk	
(Title)	

(Date)

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.

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

DISTRIBUTION		·	 I I	
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AND OFFICE				
RANSPORTER	OIL	1		
HANSPURIER	GAS			
PERATOR				_
		i	i	

NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE AND

Form C-104
Supersedes Old C-104 and C-110
Elioctive 1-1-65

i.s.g.s.	AUTHORIZATION TO TRANS	SPORT OIL AND NATURAL GAS		
AND OFFICE				
RANSPORTER GAS				
PERATOR		·		
PRORATION OFFICE				
BHP Petroleum (Amer	ricas) Inc.			
P. O. Box 3280, Ca	asper. WY 82602	·		
leason(s) for tiling (Check proper box)	257023	Other (Please explain)		
lew Well	Change in Transporter of:			
Recompletion	Oil Dry Gas	H		
hange in Ownership XX	Casinghead Gas Condensa	ite U		
change of ownership give name nd address of previous owner	Energy Reserves Group,	Inc.		
ESCRIPTION OF WELL AND L	EASE Well No.; Pool Name, Including Ford	mation Kind of Lease	Lease No.	
Callana Canyon Hait	307 Mesa Verde (Di	C C d c c	Fee NM 215	
Gallegos Canyon Unit			West	
Unit Letter L : 1455	Feet From The South Line			
Line of Section 30 Town	nship 29N Range 12	OW , NMPM, S	an Juan County	
DESIGNATION OF TRANSPORT	ER OF OIL AND NATURAL GAS	Address (Give address to which approved	i copy of this form is to be sent)	
Name of Authorized Transporter of Off	or Condensate	Address force and the more approved		
Name or Authorized Transporter of Cas	inghead Gas or Dry Gas	Address (Give address to which approved	i copy of this form is to be sent)	
	Unit Sec. Twp. P.ge.	Is gas actually connected? When		
If well produces oil or liquids, give location of tanks.		l and a sumbar	·	
If this production is commingled wit COMPLETION DATA	th that from any other lease or pool, g		Plug Back Same Resty. Diff. Resty.	
Designate Type of Completion			22.70	
Date Spudded	Date Campi. Ready to Prod.	Total Depth	P.B.T.D.	
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top O11/Gas Pay	Tubing Depth	
Perforations			Depth Casing Shoe	
	TURNIC TICING AND	CEMENTING RECORD		
	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
HOLE SIZE	CASING C 100			
TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a	fter recovery of sotal volume of load oil a epih or be for full 24 hours)	and marr be equal to or exceed top constant	
OIL WELL	I Date of Test	Producing Method (Flow, pump, 104)	9-40	
Date First New Cil Run To Tanks		BEE		
Length of Test	Tubing Pressure	Casing Preseure	Choke Size	
Caudin or 1921		Water-Bbie. JAN2	71986	
Actual Prod. During Test	OII-Bbis.	Water-Bbis.	21 MV.	
·		- OIL CC)\\.	
1		O'_ DI	ST. 3	
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 Sixe	
, and the second of the second		OU CONSERVA	ATION COMMISSION	
CERTIFICATE OF COMPLIAN		10000000	- JAN 27, 1986	
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.		BY		
TOONE IS THE SHAPE SHAPE		TITLE	SUPERVISOR DISTRICT # 3	
(1, 1, 1, 1, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2,		This form is to be filed in	compliance with RULE 1104.	
X pl (Solde		- 11	Penage of the company deliled or deepenge	
(Signalwe)		well, this form must be accompa	well, this form must be accompanied by with RULE 111.	
Dale Belden District Clerk		- All sections of this form =	All sections of this form must be filled out completely for allow-	
(Tille)		able on new and recompleted w	and MT for changes of owner.	
January 22, 1986				
	Date)	Separate Forms C-104 mu completed wells.	at be filed for each pool in multiply	