DISTERNATION SANTA FE FILE	REQUES.	CONSTRUCTION COMMISSION TEOR ALLOWABLE AND	Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65
U.S.G.S.  LAND OFFICE  TRAN PORTER GAS  OPERATOR  PRORATION OFFICE  Operator	AUTHORIZATION TO 16	RANSPORT OIL AND NATURAL (	GAS
Southland Royalty Com	ipany	•	•
P. O. Drawer 570, Far  Recson(s) for filing (Check proper box  New We!!  Recompletion  Change in Ownership	Change in Transporter of:	Other (Please explain)  Gas  ensate	
If change of ownership give name			
and address of previous owner	<b>3.</b>		
DESCRIPTION OF WELL AND Lease Name	LEASE   Well No.   Pool Name, Including	Formation Kind of Lease	Lease No.
Hare	15-M Blanco Mesa N	1	Federal SF-076958
Unit Letter 0 : 93	O Feet From The <u>SOUTH</u> L		
Line of Section 3 To	waship 29N Range	10W , NMPM, San ,	Juan County
DESIGNATION OF TRANSPOR  Name of Authorized Transporter of Oil  Plateau, Inc.  Name of Authorized Transporter of Ca  Southern Union Gather  If well produces oil or liquids, give location of tanks.	isinghead Gas or Dry Gas	AS  Address (Give address to which approx 4775 Indian Sch. Rd, NE  Address (Give address to which approx P. O. Box 1899, Bloomfile Is gas actually connected?  No	, Albuquerque, NM 87110  red copy of this form is to be sent)  eld, N. M.
If this production is commingled wi COMPLETION DATA	ith that from any other lease or pool	, give commingling order number:	
Designate Type of Completion	on - (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.
9-6-80 Elevations (DF, RKB, RT, GR, etc.)	2-3-81 Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
5862 GR	Mesa Verde	4016'	4650 t  Depth Casing Shoe
4016'-4439' (Cliff Ho		75' (Pt. Lookout)	69321
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-1/4"	8-5/8"	214'	140 sxs
7-7/8"	5-1/2"	6932'	633 sxs
	1-1/2"	4650'	
TEST DATA AND REQUEST FOOLL WELL	OR ALLOWABLE (Test must be able for this c	after recovery of total volume of load oil a lepth or be for full 24 hours)	and must be equal to or exceed top allow-
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lif	i. elc.)
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water - Bbis.	MAY'I 1981
GAS WELL		\	OIL CON. COM.  DIST. 3
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate

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)

(Date)

District Production Manager

1488 MCF

Back Pressure

Testing Method (pitot, back pr.)

April 8, 1981

VI. CERTIFICATE OF COMPLIANCE

11.

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3 hrs

1209 psig

Tubing Pressure (Shut-in)

OIL CONSERVATION COMMISSION

Choke Size

3/4"

JUL 21 1981 APPROVED\_ ared by FRANK T. CHAVEZ SUPERVISOR DISTRICT # 3

TITLE .

Casing Pressure (Shut-in)

1209 psig

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 MULE 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.