NO. OF CUPIES REC	EIVED	İ	
DISTRIBUTION			
SANTA FE			
FILE			
U.S.G.S.		1	
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
		1	

August 17, 1981 (Date)

DISTRIBUTION	NEW MEXICO OIL	CONSERVATION COMMISSION	B 0 141		
SANTA FE		REQUEST FOR ALLOWABLE  Form C-104  Supersedes Old C-104 and			
FILE		AND Effective 1-1-65			
U.S.G.S.	AUTHORIZATION TO TR	RANSPORT OIL AND NATURA	AL GAS		
LAND OFFICE					
TRANSPORTER OIL					
OPERATOR GAS			÷.		
PRORATION OFFICE					
Operator					
D. J. S	immons				
3815 Mc	Cart Street Fort Wort	h, Texas 76110			
Reason(s) for filing (Check pro	per box)	Other (Please explain)			
New Well	Change in Transporter of:				
Recompletion	OII Dry C	Gas			
Change in Ownership	Castinghead Gas Cond	ensate			
If change of ownership give and address of previous own	name				
II. DESCRIPTION OF WELL		1			
Lease Name	Well No. Pool Name, Including	Formation Kind of i	ease 1 CEOCOCO ALEGS No.		
Simmons "E"	3 R   Blanco Me	saverde State, Fe	Fed SF080000 ALease No.		
Location	1510	700			
Unit Letter L	1510 Feet From The South L	ine and 790 Feet F	rom The West		
Line of Section 24	Township 29 North Range 9	West , NMPM,	San Juan County		
III. DESIGNATION OF TRAN	SPORTER OF OIL AND NATURAL G	AS			
Name of Authorized Transporte	r of Oil 🗶 or Condensate 🔀		pproved copy of this form is to be sent)		
Plateau, Inc	r of Castnghead Gas or Dry Gas	Albuquerque N. M.	27110  pproved copy of this form is to be sent;		
· · · · · ·					
El Paso Natu	ral Gas Co. Unit   Sec.   Twp.   Ege.	Is gas actually connected?	P.O.Box 990 Farmington, N.M. 87401		
If well produces oil or liquids, give location of tanks.	L 24 29N 9W	Yes	Ready for delivery.		
If this production is comming	led with that from any other lease or pool	, give commingling order number:	1		
IV. COMPLETION DATA	Oil Well Gas Well	New Well Workover Deeper	Plug Back   Same Resty. Diff. Resty.		
Designate Type of Con	, <b>,</b> ,	x			
Date Spudded	Date Compi. Ready to Prod.	Total Depth	P.B.T.D.		
3-6-81 Elevations (DF, RKB, RT, GR,	3-22-81  etc., Name of Producing Formation	5600 Top Oil/Gas Pay	5560		
		1572	Tubing Depth		
10 Reprorquente 65 (3A4 605)	<u>,4613,4649,4673,4681,46</u>	95.4827.4835.4887.2	5500 394 Depth Casing Shoe		
5237:5243:5249:52	Blanco Mesaverde ,4613,4649,4673,4681,469 68,5273,5307,5349,5403,	5193,5197,5219,52 <b>2</b> 5 5445,5467,5495,556	5,5231, 5600		
	TUBING, CASING, AN	D CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
13 3/4"	9 5/8"	281	265		
8 3/4"	7"	3348	550		
AXXXXXXXX 6½"	4½" (liner)	3178 to 5600	330		
N TEST DATA AND DESKIE	CON FOR ALLOWARY		· · · · · · · · · · · · · · · · · · ·		
V. TEST DATA AND REQUE OIL WELL	able for this d	after recovery of total volume of load epth or be for full 24 hours)	oil and must be equal to or exceed top allow-		
Date First New Oil Run To Tar	ks Date of Test	Producing Method (Flow, pump, ga	s lift, etc.)		
Length of Test	Tubing Pressure	Casing Pressure	Choke Size		
Actual Prod. During Test	Otl-Bbls.	Water - Bbls.	Gen-NCF		
			/ Elling in a line in a li		
GAS WELL			1 SERROR TOOL		
Actual Production - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate		
40E-5 242	3 hrs.		Gravity of Condensate		
Testing Method (pitos, back pr.	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size 3		
Back Press.	553 psig(Shut-in)	582 psig(Shut-in)			
VI. CERTIFICATE OF COMP.	LIANCE	OIL CONSER	VASEPCEMMISSON		
* hands a state of the state of		ADDDOVED	10		
Commission have been comp	s and regulations of the Oil Conservation lied with and that the information given	Oriniani	1 Signed by FRANZ I. CASA 44		
above is true and complete	to the best of my knowledge and belief.	BY			
11.		TITLE			
Ashton B. Gere	Jeren Q				
Ashton R. Gara	n. Ir.	1	in compliance with RULE 1104.		
	(Signature)	well, this form must be accor	llowable for a newly drilled or deepened npanied by a tabulation of the deviation		
Mgr.&Sunt. for:	D.J. Simmons, Opr.	tests taken on the well in accordance with RULE 111.			
	mil.	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