Costiculation NEW PURICO OIL, CONCERNATION COMMISSION Torm C - 194 SAMIA II REQUEST FOR ALLOWARLE Supersedes Old C-los and C-1 Effective 1-1-65 ABD บ.ร.ธ.ร. AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS LAND OFFICE OIL TRAL PORTER DEFERMIOR PRORATION OFFICE Southland Royalty Company P. O. Drawer 570, Farmington, New Mexico 87401 Reason(s) for filing (Check proper box) Other (Please explain) XNew Well Recompletion Dry Gas CII Change in Ownership Castnghead Gas Condensate If change of ownership give name and address of previous owner II. DESCRIPTION OF WELL AND LEASE Well No. Pool Name, Including Formation Kind of Lease Lease No. State, Federal or Fee Federal <u>Grenier "B"</u> 3-ENM-03561 Basin Dakota 1530' Feet From The South 1530 East Line and Feet From The 29N Township 10W Range San Juan County II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil Address (Give address to which approved copy of this form is to be sent) 4775 Ind. Sch. Rd, N.E., Albuquerque, NM 87110 Address (Give address to which approved copy of this form is to be sent) Plateau, Inc. Name of Authorized Transporter of Casinghead Gas _____ or Dry Gas 🔀 Southern Union Gathering P.O. Box 1899, Bloomfield, New Mexico Is gas actually connected? When If well produces oil or liquids, give location of tanks. NO If this production is commingled with that from any other lease or pool, give commingling order number: V. COMPLETION DATA Oll Well Gas Well New Well Workover Same Resty. Diff. Resty Plug Back Designate Type of Completion - (X) X Date Spudded Date Compl. Ready to Prod. Total Depth P.B.T.D. 4-17-81 5-31-81 <u>69</u>10' 6863 Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation Top Oil/Gas Pay Tubing Depth 5847' GR Dakota 6702**'** 6748' Perforations Depth Casing Shoe 6702'-6868' 6910' TUBING, CASING, AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT 13-3/4" 10-3/4" 150 sacks 206' 5-1/2" 7**-**7/8" 6910' 1170 sacks 1-1/2" 6748' V. TEST DATA AND REQUEST FOR ALLOWABLE (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 Producing Method (Flow, pump, gas lift, etc.) Date of Test Length of Test Tubing Pressure Casing Pressure Chok Actual Prod. During Test Cil-Bbls. Water - Bble.

OIL WELL

JUL 13 1981 OIL CON: COM: DIST. 3 GAS WELL Actual Prod. Test-MCF/D Length of Test Bbls. Condensate/MMCF Gravity of

140 3 hours Testing Method (pitot, back pr.) Tubing Pressure (Shut-in) Casing Pressure (Shut-in) Choke Size Back Pressure 1042 OIL CONSERVATION COMMISSION

APPROVED.

TITLE

I. 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)

Manager District Production

(Dute)

July 2, 1981

(Title)

All sections of this form must be filled out completely for allowable on new and recompleted wells.

This form is to be filed in compliance with RULE 1104.

Original Signed by FRANK T. CHAVEZ

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

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.

AUG 24 1981

SUPERVISOR DISTRICT # 3