L	125	1.55			
DISTRIBUTE					
ANTA FE	1				
FILE					
J.\$.G.\$.	 				
LAND OFFICE					
IRANSPORTER	OIL	1			
	GAS	1			
OPERATOR	1				
PRORATION OFFICE					
Operator					
SP	UTHER	N U	NION		
Address					
P.	0. B	OX	808,		

ANTA FE	+,+	┥ ,	NEW MEXICO	OIL	CONSERVATION COMM	MISSION	F	brm C-104	
FILE	+ - + -		REQ	UEST	ST FOR ALLOWABLE Su			upersedes O	ld C-104 and C-1
J.S.G.S.	+++-	-			AND			Effective 1-1-65	
LAND OFFICE	++	_ AUTH	ORIZATION TO	O TR	ANSPORT OIL AND	NATURAL	GAS		
	+++-	_							
TRANSPORTER OIL	+:+-	_							
GAS	+-+-	_							
OPERATOR	11	_							
PRORATION OFFICE	 _								
·	N IINT	ON PRODUC	TON COMPANY	7					
Address				-					
	OX RO	S. FARMIN	TON, NEW ME	ext c	0 87401				
Reason(s) for filing (Check		-	TONS HEW PLE	MAL O					
New Well	proper box	•			Other (Please	explain)			
			n Transporter of:						
Recompletion		011	7	Dry G	as L				
Change in Ownership		Casinghe	ead Gas	Conde	nsate				
If change of ownership giv	e name								
and address of previous or									
II. DESCRIPTION OF WEL	L AND	LEASE	Pool Name, Inclu				·		
SEYMOUR			1			Kind of Leas			SFease No.
Location		1-A	BLANCO M	MAC A	V ERUE	State, Federa	lorFee F	ederal	078505
Location To	441	nd	0		***				
Unit Letter	<u>, 112</u>	Feet Fro	om The South	Lir	ne and	Feet From 1	The	ast	
Line of Section 25	_	. 24	North Bana		9 West	0	Y		
Line of Section 23	100	wnship 31	NOPUL Rang	e i	, NMPM,	San	Juan		County
III DESIGNATION OF TRA	NCDOD	TED OF OU	43:D 4:4 m						
Name of Authorized Transpo	rter of Oil	IER OF OIL	and NATURA	L GA	Address (Give address t	o which appear		11. 6	
Plateau, Inc.									o be sent)
Name of Authorized Transpo		singhead Gas	or Dry Gas	Y	Farmington,	New Mext	0 8740	77	
Southern Union G				<u>La</u> L	1507 Pacific Av	e Fide	iity vhi	Lon Towe	o be sent)
		Unit Sec	<u> </u>		parras, reves,	ACUIT	voperr	McCrary	7
If well produces oil or liquid give location of tanks.	s,	P 25		w W	Is gas actually connecte No	d? Whe	'n		
					<u> </u>				
If this production is commi IV. COMPLETION DATA	ngled wit	th that from an	y other lease or	pool,	give commingling order	number:			
IV. COMPLETION DATA		10	Oil Well Gas W	Ve11	New Well Workover	Deepen	[D] D		
Designate Type of C	ompletic			X	1	Deepen	Plug Back	Same Hes	v. Diff. Restv.
Date Spudded		Date Compl. F	leady to Prod.		Total Depth	<u> </u>	 	<u> </u>	1
6/24/75		8/29	1944) 10 F164.		5810 ft. R	K.B.	P.B.T.D. 5767	ft. R.K	r in
Elevations (DF, RKB, RT, G	R etc.		icing Formation		Top Oil/Gas Pay		Tubing Depth		
6509 ft. Gr.	Blanco Mesaverde 5154 ft. R.K.B.				K.B.	5610 ft. R.K.B.			
Perforations							Depth Casi		
5154 -	5667	ft. R.K.B	•					ft. R.K	C-R-
		т	LIBING CASING	AND	CEMENTING RECORD	`	70,0	701 1001	
HOLE SIZE			& TUBING SIZE		DEPTH SE			ACKS OF	
15**		10-3/			416 Ft.		SACKS CEMENT		ENT
8-3/4"		717			3530 ft.			251	
6-1/4*		4-1/	2" Liner		Top: 3372' Bott			300	
		2-1/	16" I.J.		5610 ft.				
V. TEST DATA AND REQU	EST E	DP ATTOWA	DIE /T	. 1				(
OIL WELL	ESI FU	JR ALLOWA		t be aj his dej	ter recovery of total volum pth or be for full 24 hours)	se of load oil a		de to or e	xc ed top allow-
Date First New Oil Run To T	anks	Date of Test			Producing Method (Flow,			1915	-\
							VA Da	1 des.	2kr.)
Length of Test		Tubing Pressu	re .		Casing Pressure		Choke Size	10 C	2,
							/ ८९		3/
Actual Prod. During Test		Oil-Bbis.			Water - Bbls.		das-MCF	-674	
							7	V . Q _{L.} >	/
(<u> </u>		L					- 1-5		
GAS WELL									
Actual Prod. Test-MCF/D		Length of Test			Bbls. Condensate/MMCF		Gravity of C	Condensate	
1066		3 ho	urs				G. 4711, 01 (, ondertage	Į
Testing Method (pitot, back p	r.)	Tubing Pressu	e (Shut-in)		Casing Pressure (Shut-	ln)	Choke Size		
Back Pressure		368	•	ļ	367		Choke Size	3/4"	
VI. CERTIFICATE OF COM	PLIANC	F			011 0	ONSERVA	FIONI COL	44466104	
	DIMINO				OIL C	JNSERVA			
I hereby cortify that the rul	I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given			APPROVED SEP 15,1975					
Commission have been con				By Original Signed by A. R. Kendrick					
									
					TITLE	S	UPERVISO	OR DIST.	#3
		_] [
	Original signed by This form is to be filed in compliance with RULE				1104.				
Dan R. Collier		Dan R	Collier		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.				
	(Signat B Mana	ture)	•						
01110	·				All sections of the			_	
September ((Title 9 107	e) 15			able on new and reco	mpleted well	8.		}
September '	·][Fill out only Se				
	(Date	e)			well name or number,	or transporter	, or other s	uch change	of condition.
				51	Canarata Forms	C-104 must	ha filad fo		ol in multinly