DISTRICT II P.O. Drawer DD, Ariesia, NM 88210

OIL CONSERVATION DIVISION

P.O. Box 2088 Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.	·	TO TRA	NSP	ORT OIL	AND NA	TURAL GA	95	DI NI-			
Operator Vantage Point Operating Company						Well APT No. 30045 10539					
Address 5801 E. 41st, su	ite 1001	Tula	a 01	k l ahoma	7/,125						
Reason(s) for Filing (Check proper box)					Oth	a (Please expl	ain)			************	
New Well Recompletion Change in Operator	Oil Casinghea	Change in Transporter of: Oil Dry Gas D INJECTION WELL Casinghead Gas Condensate									
If change of operator give name ADC					O. Box 1	610, Mid	iland, T	exas 797	702		
	ivision	of Atl									
Lease Name Horseshoe Gallup Uni		Well No. Pool Name, Includi				State			of Lease No. Federal or Fee 14-20-603-2037		
Location Unit Letter	. 18	75	Feet Fr	rom The 5	outh Lin	and 190	00	et From The	East	Line	
_	hip 31-1			17-W		мРМ,	San Jua			County	
III DESIGNATION OF TDA	NSPORTE	'R OF O	II. AN	D NATI	RAL GAS						
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil or Condensate Address (Give address to which approved copy of this form is to be a									orm is to be se	ni)	
Name of Authorized Transporter of Cas	me of Authorized Transporter of Casinghead Gas or Dry Gas					Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp	Rge.	ge. Is gas actually connected?			When ?			
If this production is commingled with the	d from any oth	her lease or	pool, giv	ve comming!	ing order num	ber:					
IV. COMPLETION DATA		Oil Well		Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Designate Type of Completio	Date Compl. Ready to Prod.				Total Depth			P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of F	Name of Producing Formation				Top Oil/Gas Pay			Tubing Depth		
Perforations					<u>L</u>			Depth Casin	Depth Casing Shoe		
		TUBING.	CASI	NG AND	CEMENTI	NG RECOR	TD				
HOLE SIZE		CASING & TUBING SIZE				DEPTH SET			SACKS CEMENT		
								 			
V. TEST DATA AND REQU	EST FOR	ALLOW	ABLE		J				- 4.11.34 h		
OIL WELL (Test must be after	Date of Te		of load	oil and must	Producing M	exceed sop all ethod (Flow, p	wable for the	es depth or be j	for Juli 24 Note	73.)	
						Casing Pressure Cholente 5					
Length of Test	Tubing Pr	Tubing Pressure						Car Ag			
Actual Prod. During Test	Oil - Bbls	Oil - Bbis.			Water - Bbls.			MAR 0 4 1991			
GAS WELL						* A D (2**		Q	L CON	I. DIV.	
Actual Prod. Test - MCF/D	Length of	Length of Test Tubing Pressure (Shut-in)				Bbls. Condensate/MMCF Casing Pressure (Shut-in)			Gravity of Condensity 3		
Testing Method (pitot, back pr.)	Tubing Pr								Choke Size		
VI. OPERATOR CERTIFI I hereby certify that the rules and re	CATE OI	F COMI	PLIA?	NCE		OIL COI	NSERV	ATION	DIVISIO)N	
is true and complete to the best of my knowledge and belief.					Date Approved FEB 2 7 1991						
Weborgh J. Greenich					By_ 3.12 Chang						
Printed Name 1-19-91 918-644-2100					Title SUPERVISOR DISTRICT #3						
1-19-91 Dute	918		ephone !								

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.