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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

Operator <u>Antec Oil and Gas</u>	
Address <u>Drawer 570, Farmington, New Mexico</u>	
Reasons for filing (Check proper box)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Recompletion <input type="checkbox"/>	
Change in Ownership <input type="checkbox"/>	Other (Please explain)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>Thompson</u>	Well No. <u>14</u>	Lease Location <u>Antec Pictured Cliffs</u>	Kind of Lease State, Federal or Fee	Lease No. <u>NM-01614</u>
Location Unit Letter <u>I</u> ; <u>1650</u> Feet From The <u>South</u> Line and <u>1080</u> Feet From The <u>East</u> Line of Section <u>28</u> Township <u>31N</u> Range <u>12W</u> , NMPM, <u>San Juan</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> <u>Antec Oil and Gas</u>	Address (Give address to which approved copy of this form is to be sent) <u>Drawer 570, Farmington, New Mexico</u>	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> <u>Southern Union Gathering</u>	Address (Give address to which approved copy of this form is to be sent) <u>Fidelity Union Tower, Dallas, Texas, 75201</u>	
Is well producing oil or liquids, give location of tanks.	Unit	Sec.
	Top.	Age.
		Is gas actually connected?
		When <u>Att: Oren Haseltine</u>

If this production is commingled with that from any other lease or pool, give commingling order number:

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well <input checked="" type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Reinf. <input type="checkbox"/>	Diff. Reinf. <input type="checkbox"/>
Well Number	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
<u>2-2-62</u>	<u>6-16-62</u>	<u>2735</u>	<u>2735</u>					
Deviation (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
<u>2270 Gr</u>	<u>Pictured Cliffs</u>	<u>2624</u>	<u>2611</u>					
Perforations						Depth Casing Shoe		
<u>2624-38 4 SPF</u>						<u>2735</u>		

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-1/4"	8-5/8"	111	60 sm
6-3/4"	4-1/2"	2735	250 sm
	1"	2611	

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	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Flow During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF
GAS WELL			
Method Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MWCF	Gravity of Condensate
<u>back pressure</u>	<u>2 hr</u>		
Producing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
	<u>0</u>	<u>0</u>	<u>3/4"</u>

VI. 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.

Joe C. Arnold
(Signature)
District Superintendent
(Title)

July 1, 1969
(Date)

OIL CONSERVATION COMMISSION

AUG 27 1969

APPROVED

BY Original Signed by Emery C. Arnold

TITLE SUPERVISOR DIST. #3

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 RULE 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 conditions.