DISTRIBUTION SANTA FC

NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE

Fbim C-104 Supersedes Old C-104 and C-110

F11.1:		AND	Uffective 1-1-65
LAND OFFICE	AUTHORIZATION TO TR	PANSPORT OIL AND NATURAL	GAS
011 /			
TRAH PORTER GAS			
OPERATOR 3	_		
Operator OFFICE			
	ating Company		•
Address 808 I incoin	Tower Building, 1860 Lin	coln St. Denver Colora	do 80295
Reason(s) for filing (Check proper bo		Other (Please explain)	
New Well	Change in Transporter of:		·
Recompletion	OII Dry G	H rirgt sale or	casinghead gas
Change in Ownership	Casinghead Gas Conde	ensate	
If change of ownership give name and address of previous owner			
•			hv00 0
DESCRIPTION OF WELL AND Lease Name	Well No. Pool Name, Including F	Formation Kind of Leas	*N00-C-1420-0622
Heather Ann	#1 Verde Gallup	State, Federa	lorFee Ute *
Location			
Unit Letter P : 6	60 Feet From The S Li	ne and 992 Feet From	The <u>E</u>
Line of Section 7 To	ownship 31N Range	14W , NMPM,	San Juan County
DESIGNATION OF TRANSPOR Name of Authorized Transporter of Gi	TER OF OIL AND NATURAL GA	AS Address (Give address to which appro	ved copy of this form is to be sent)
Inland Cr	ude	Farmington, NM 874	01
		Address (Give address to which appro	
	ny of New Mexico	208 E. Apache St.,	
If well produces oil or liquids, give location of tanks.	P 7 31N 14W		oon as roads dry out
If this production is commingled wi	ith that from any other lease or pool,	give commingling order number:	N/A
COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Resty. Diff. Resty.
Designate Type of Completi	on – (X) X		
Date Spudded 2/21/75	Date Compl. Ready to Prod. 4/2/75	Total Depth 2600 *	P.B.T.D. N/A
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top O!I/Gas Pay	N/A Tubing Depth
6030 KB	Gallup	2440'	2570'
Perforations		•	Depth Casing Shoe
None	TURING CASING AN	D CEMENTING RECORD	2440'
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
			1
TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a	after recovery of total volume of load oil (epth or be for full 24 hours)	and must be equal to or exceed top allow-
OII, WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas li)	(i, etc.)
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bble.	Water - Bbls.	Gas-MCF
		<u> </u>	
CAR WELL			
GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbis. Condensate/MMCF	Gravity of Condensate
Teeting Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
CERTIFICATE OF COMPLIAN	CE	OIL CONSERVA	TION COMMISSION
hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given			1979
		APPROVED, 19	
shove is true and complete to the	best of my knowledge and belief.	By Original Signed by A	. K. Kendrick
	1/sti	TITLE SUPERVISOR D	IST. 🗱
- Heren		This form is to be filed in compliance with RULE 1104.	
/Eli	~ XX	If this is a request for sllow	able for a newly drilled or deepened
Elliott A. Riggs (Signature)		well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with AULE 111.	
Agent - Farmington, NM (Title)		All sections of this form must be filled out completely for allowable on new and recompleted wells.	
March 5, 1979 (Date)		Fill out only Sections I, II	. III, and VI for changes of owner,
		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	
		completed wells.	