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Form C-104 Supersedes Old C-104 and C-110

NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE Effective 1-1-65 AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS Operator Southland Royalty Company Drawer 570, Farmington, New Mexico Reason(s) for filing (Check proper box) Other (Please explain) New Well Change in Transporter of: Recompletion Oil Dry Gas Change in Ownership Casinghead 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. Chamber lain 1-A Blanco Mesa Verde FEE Location 1680 Feet From The North Line and 1760 West Unit Letter Feet From The 14 Township 32N 12W Range , NMPM, <u>San Juan</u> County Address (Give address to which approved copy of this form is to be sent) P. O. Box 108, Farmington, New Mexico Name of Authorized Transporter of Casinghead Gas Address (Give address to which approved copy of this form is to be sent) or Dry Gas X Southern Union Gathering O. Box 1899, Bloomfield, New Mexico Is gas actually connected? Unit Sec P.ge. 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 Workover Oil Well Gas Well New Well Deepen Plug Back Same Res'v. Diff. Res'v. Designate Type of Completion - (X) χ Date Compl. Ready to Prod. Total Depth 4-25-78 53101 5-14-78 5324' Name of Producing Formation Top Oil/Gas Pay Tubing Depth Elevations (DF, RKB, RT, GR, etc.) 6202' GL Mesa Verde 42381 5241' Perforations Depth Casing Shoe 5324' 4238'-5300' TUBING, CASING, AND CEMENTING RECORD SACKS CEMENT CASING & TUBING SIZE DEPTH SET HOLE SIZE 9-5/8" 2191 160 sxs 12-1/4" 7" 29651 8-3/4'' 6-1/4'' 235 sxs 4-1/2" 165 sxs 28291-53241 5241 2-3/8" 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. OII. WELL. OIL WELL Producing Method (Flow, pump, gas lift, etc.) Date First New Oil Run To Tanks Date of Test Choke Size Casing Pressure Tubing Pressure Length of Test Water-Bbls. Actual Prod. During Test Oil - Bbls. **GAS WELL** Cond Coate Actual Prod. Test-MCF/D Length of Test Bbls. Condensate/MMCF tv of 9521 3 Hrs Testing Method (pitot, back pr.) Tubing Pressure (Shut-in) Casing Pressure (Shut-in) Choke Size 812 psig <u>864 psig</u> Back Pressure CIL CONSERVATION COMMISSION I. CERTIFICATE OF COMPLIANCE 4. APPROVED I heraby 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. Original Signed by FRAME TOWARD 1311 01 4 TITLE This form is to be filed in compliance with RULE 1104.

An (Signature)

District Production Manager

(Title)

June 2, 1978

(Date)

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 MULE 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 condition.

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