

NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE		Form C-104 Supersedes Old C-104 and C-1 Effective 1-1-65	
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS			
Consolidated Oil & Gas, Inc.			
Address 1860 Lincoln Street, Denver, Colorado 80295			
Reason(s) for filing (check proper box)		Other (Please explain)	
New Well <input type="checkbox"/>	Change in Transporter of Oil <input type="checkbox"/>	Change letter suffix Montoya 1A to Montoya 1M	
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/>	Dry Gas <input type="checkbox"/>	Condensate <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/>		
If change of ownership give name and address of previous owner			
DESCRIPTION OF WELL AND LEASE			
Lease Name Montoya	Well No. 1M	Pool Name, including Formation Basin Dakota	Kind of Lease State, Federal or Fee
Fee		Lease No.	
Location			
Unit Letter "I"	1850	Feet From The South	Line and 790
Feet From The East			
Line of Section 35	Township 32 North	Range 13W	San Juan County
DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS			
Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)		
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	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.	Is gas actually connected?		When
If this production is commingled with that from any other lease or pool, give commingling order number:			
COMPLETION DATA			
Designate Type of Completion - (X)	Oil Well	Gas Well	New Well
Workover	Deepen	Plug Back	Same Res'v.
Diff. Res'v.	Date Spudded	Date Compl. Ready to Prod.	Total Depth
P.B.T.D.	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay
Tubing Depth	Perforations	Depth Casing Shoe	
TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (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 Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
GAS WELL			
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (piston, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION	
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.		APPROVED _____, 1979	
BY _____		BY _____	
TITLE _____		TITLE _____	
Floyd E. Edmon, Jr. (Signature) Vice Pres. Operations, Rocky Mtn. Div.		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 condition. Separate Forms C-104 must be filed for each pool in multiply recompleted wells.	
November 2, 1979 (Date)			