HO. OF COPIES RECE	EIVED		~ - ~ · ·
DISTRIBUTION			
SANTA FE			
FILE			
U.S.G. <b>S.</b>			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPE' OR	OR		
BROE ON OFF	ON OFFICE		

DISTRIBUTION SANTA FE		CONSERVATION COMMISSION Form C-104 FOR ALLOWABLE Supersedes Old C-104 and C-11		
FILE		AND Effective 1-1-65		
U.S.G. <b>S.</b>	AUTHORIZATION TO TRA	ANSPORT OIL AND MATURAL G	4S	
LAND OFFICE	<del> </del>			
TRANSPORTER OIL	<del>  </del>			
OPE OR				
Operator	1			
Southland Royalty	Company			
1	Farmington, New Mexico			
Reason(s) for filing (Check proper		Other (Please explain)		
New Well	Change in Transporter of:			
Recompletion Change in Ownership	Cil Dry Go	<b>=</b> 1		
If change of ownership give name and address of previous owner				
II. DESCRIPTION OF WELL A	ND LEASE    Well No.   Pool Name, Including F	ormation Kind of Lease	Lease No.	
Hubbard	8 Blanco Picture	d Cliffs State, Federal	or Fee FEE	
Location	1700		r	
Unit Letter;	1780 Feet From The North Lir	ne and <u>1690</u> Feet From Th	East	
Line of Section 15	Township 32N Range	12W , NMPM, Sa	n Juan County	
	ORTER OF OIL AND NATURAL GA			
Name of Authorized Transporter of	t St or Condensate	Address (Give address to which approve	d copy of this form is to be sent)	
Name of Authorized Transporter o.	f Casinghedd Gas or Dry Gas 🛣	Address (Give address to which approve	d copy of this form is to be sent)	
Southern Union Gat		P.O. Box 1899, Bloomfiel		
If well produces oil or liquids, give location of tanks.	Unit Ser. Two R <b>ge.</b>	Is gas actually connected? When		
If this production is commingled	d with that from any other lease or pool,	······································		
IV. COMPLETION DATA	Si. Weli Gas Weli	New Well Workover Deepen	Piles Back   Same Res'v. Diff. Res'v.	
Designate Type of Compl		X .	1	
Date Spuddou	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
10-13-83	11-17-83	2775 '	2747 Tubing Depth	
	Pictured Cliffs	0		
Percutations	110 Car Ca Ciliis	•	Depth Casing Shoe	
2551'-2575'			2757'	
		D CEMENTING RECORD		
90.5 SIZE	CASING & TUBING SIZE	2091	SACKS CEMENT	
12-1/4"	9-5/8" 2-7/8"	2757'	130 cu.ft. 920 cu.ft.	
6-3/4"	2-7/8	2/5/	920 CU.IC.	
V. TEST DATA AND REQUEST OIL WELL	F FOR ALLOWABLE (Test must be a able for this de	fter recovery of total volume of load oil arepth or be for full 24 hours)		
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift,	etc.)	
Langth of Test	Tubing Pressure	Casing Pressure	Choke Size	
Ewifiti Ot 'ami	TARMA CIBORMA			
Actual Prod. During Test	Oil-Bbis.	Water - Bbls.	Gas - MCF	
CAS VELL		k sid page in		
Actual Prod. Test-MCF/D	Length of Test	Bbis. Condensate/MMCF	Gravity of Condensate	
174  Testing Method (pitot, back pr.)	3 Hours Tubing Pressure (shut-in)	Casing Pressure (Shut-in)	hoke Size	
Back Pressure		731	3/4"	
VI. CERTIFICATE OF COMPLI	ANCE	OIL CONSERVAT	TION COMMISSION	
i leaders exertify that the cules of	and regulations of the Oil Conservation	APPROVED	<u>DEC</u> , 2,9.3983	
Commission have been compile	ed with and that the information given the best of my knowledge and belief.	BY		
2001 - 13 1140 wild complete to	and the second s	SUPERVISOR DISTRICT	# 8	
A	Λ,	This form is to be filed in co	mpliance with RULE 1104.	
Cutting.	Trecese	If this is a sequent for allows	hie for a newly drilled or deepened	
	(Signature)  Well, this form must be accompanied by a tabulation of tests taken on the well in accordance with RULE 111.		led by a tabulation of the deviation	
Secretar		All sections of this form must	be filled out completely for allow-	
40.00.00	(Title)	able on new and recompleted well	ls.	
12-28-83	3 (Date)	Fill out only Sections I, II, well name or number, or transporte	III, and VI for changes of owner, or other such change of condition	

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.