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SANTA FE			1		
FILE					
U.S.G.S.					
LAND OFFICE					
IRANSPORTER		OIL			
		GAS	1		
OPERATOR			1		
PRORATION OFFICE					
Operator					
	TRAN				
Address	1330	EYD	EN 3	STR	
	DENV	ER, C	OLC	RA	
Regentle) for tiling (Check proper box)					

## NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE

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

	U.S.G.S.  LAND OFFICE  IRANSPORTER  OPERATOR  /  /  /  /  /  /  /  /  /  /  /  /  /	AUTHORIZATION TO TRA	AND INSPORT OIL AND NATURAL	_ GAS			
1.	Operation OFFICE TRANS DELTA OIL & GAS CO., INC.						
	Address 1330 LEYDEN SIK	VER, COLORADO 80220					
	Reason(s) for filing (Check proper box)	DO 00220	Other (Please explain)	N. Olamas from			
	New Well	Other Corporate Name Change from					
	Recompletion	OII Dry Ga	" Dyna Ray Oi	& Gas Co., Inc. to			
	Change in Ownership	Casinghead Gas Conden	T Dolla	Oil & Gas Co., Inc.			
	If change of ownership give name and address of previous owner		I rans Deita	On G Cas Co., me.			
The processing of MELL AND LEAGE							
II.	Lease Name JICARILLA B 156	Well No. Pool Name, Including Fe 3 SO BLANCO		Lease No.			
	Location Unit Letter M : 810	Feet From The _SLin	e and <u>845</u> Feet Fro	om TheW			
	Line of Section Tow	nship 23N Range	XX 2W, NMPM, R	IO ARRIBA County			
III.	DESIGNATION OF TRANSPORT	or Condensate	Address (Give address to which ap	proved copy of this form is to be sent)			
	Name of Authorized Transporter of Cas EL PASO NATURAL GAS			proved copy of this form is to be sent)			
	If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected?	When			
	give location of tanks.	l l l l i	1963				
IV		his production is commingled with that from any other lease or pool, give commingling order number:					
1♥.	Designate Type of Completio	Oil Well Gas Well	New Well Workover Deepen	Plug Back   Same Restv. Diff. Restv.			
	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 Casi		Depth Casing Shoe			
			CEMENTING RECORD	SACKS CEMENT			
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT			
		<u> </u>					
v	TEST DATA AND REQUEST FO	OR ALLOWABLE (Test must be a	fter recovery of total volume of load	oil and must be equal to or exceed top allow-			
٠.	OIL WELL Date First New Oil Run To Tanks	able for this depth or be for full 24 hours)					
	Date First New Off Run to Junks						
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size			
	Actual Prod. During Test	Oil-Bble.	Water - Bbls.	Gas-MCF			
	GAS WELL						
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate			
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Sign 3			
VI.	VI. CERTIFICATE OF COMPLIANCE			VATION COMMISSION JAN 5 1973			
	I hereby certify that the rules and r Commission have been complied w	ith and that the information given	By Original Signed by A. R. Kendrick				
above is true and complete to the best of my knowledge and belief.			TITLE PETROLEUM ENGINEER DIST. MO. 3				
			<del>}</del>				
	1926 V	(227)	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.				
	(Signa	iture)					
CHIEF ACCT			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.				
DEC 20 1972 (Date)			well name or number, or trans	nust be filed for each pool in multiply			

DURKING WEST TO BEATS FIRST AND MINISTERALS DEPARTMENT \$115 7 M IN UT 10/4 SANTA PE 711.4 U \$.0.8.

December 1, 1980

(Date)

## OIL CONSERVATION DIVISION P. O. BOX 2088

Rhyland 10-1-78

SANTA FE, NEW MEXICO 87501

KAND DEFILE
THANSPORTER OIL REQUEST FOR ALLOWABLE VPIU AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS OPERATOR MUNATION OFFICA Operator Petro Lewis Corporation Address P. O. Box 937, Levelland, Texas 79336 Other (Please explain) Reason(s) for filing (Check proper box) Change in Transporter of: New Wall Dry Gus . Recompletion Condensata Casinghead Gas Change in Ownstahls X Michange of ownership give name Trans Delta Oil and Gas Co., Inc., 6300 Ridglea Place, Fort Worth, and address of previous owner. 76116 DESCRIPTION OF WELL AND LEASE | Vell No. | Pool Name, Including Fernation Logas No. Kind of Lease Indian State, Federal or Fee Blanco PC South \_0900015 Jicarilla "B" 156 3 Location 810 Feet From The South Line and 845 Feel From The West County . NMPM, Rio Arriba Range 2 W 23 N Township DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Oil Address (Give address to which approved copy of this form is to be sent) Home of Authorized Transporter of Casinghedd Gas or Dry Gas & El Paso Natural Gas Co. P. O. Box 1492, El Paso, Texas 79978. Trwp. Unit If well produces off or liquids, Yes give location of tanks. If this production is commingled with that from any other lease or pool, give commingling order numbers Plug Bock | Same fiesty, Diff. Rest. Deepen COMPLETION DATA Workover Gas Well New Well Oil Well Designate Type of Completion - (X) P.B.T.D. Total Oppth Day Compt. Ready to Prod. Tubing Dooth Top Oil/Cas Pay Hame of Producton Committee Elevations (DF, RKS, RT, GR, ste.) Dapile Coaling Shor Perferellons TUBING, CASING, AND CEMENTING RECORD DEPTH SET CASING & TUBING SIZE HOLE SIZE 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 allowers).

OIL WELL. OIL WELL Producing Method (Flow, pump, gas lift, etc.) Date of Tost Data First New Oil Run To Tanks Castag Pragawa Tubing Prosours Length of Tool Waint - Bble. Oil-bbls. Actual Prod. Dertag Tool Cichart of Conjapani GAS WELL Bbla. Condensate/AMCF Actual Fred. Isst-MCF/D Longth of Tost Cosing Pressure (Shut-10) Tubing Prosoure (Shut-La) Feeling Liethod (prot. back pr.) OIL CONSERVATION DIVISION CESTIFICATE OF COMPLIANCE DEC APPROVED\_ I hereby certify that the rules and regulations of the Oil Conservation pivision have been complied with and that the information given above is true and complete to the best of my knowledge and belief. ( : · DY\_ SUPERVISOR DISTRICT 第 3 TITLE \_\_\_\_ This form is to be filled in compliance with MULE 1104, If this is a request for allowable for a newly drilled or douper yeorgew a well, this form must be accompanied by a total-stion of tests taken on the well in accordance with nuck iti. District Administrator

All sections of this form must be filled out completely for all able on new and recompleted walls, Fill out only Sections I. II, III, and VI for changes of own well name or number, or transporter or other such change of condit

Separata Forms C-104 must be filled for each pool in multi completed wells;