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Appropriate District Office
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DISTRICT III
1000 Rio Sanos Rd., Aztec, NM 87410

State of New Mexico
Energy, Minerals and Natural Resources Department
OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

**REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS**

Operator SOUTHEASTERN PETROLEUM, INC.		Well APN No. 30-043-05284
Address P.O. BOX 1893, ROSWELL, NM 88202		
Reason(s) for Filing (Check proper box) New Well ☐ ☒ Other (Please explain) Recompletion ☐ ☒ CHANGE OF OPERATOR & NAME OF WELL Change in Operator ☒ ☐ CHANGE FROM GOLA #5 TO BOBCAT #15 Change in Transporter of: ☒ Oil ☐ Dry Gas ☐ EFFECTIVE APRIL 1, 1993 ☐ Coalbed Gas ☐ Condensate ☐		
If change of operator give name and address of previous operator GOLA OIL CO. 991 PLAYER LOOP, RIO RANCHO, NM 87124		

II. DESCRIPTION OF WELL AND LEASE		Well No. 15	Pool Name, including Formation SO. SAN LUIS/MESA VERDE	Kind of Lease State (Federal) or Fee	Lease No.
Lease Name BOBCAT					
Location Unit Lot F : 1883 Feet From The NORTH Line and 1834 Feet From The WEST Line Section 4 Township 17 N Range 3 W NMPM SANDOVAL County NM					

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS					
Name of Authorized Transporter of Oil ☐ or Condensate ☐			Address (Give address to which approved copy of this form is to be sent)		
Name of Authorized Transporter of Coalbed Gas ☐ or Dry Gas ☐			Address (Give address to which approved copy of this form is to be sent)		
Operator & Name Change only					
If well produces oil or liquids, give location of tanks			Unit	Sec.	Trp.
			Reg.	Is gas actually connected? When?	

IV. COMPLETION DATA									
Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Stim. Recv	Art. Rev
Date Completed		Date Comp. Ready to Prod.		Total Depth		P.B.T.D.			
Elevations (EL, K&B, RT, Col, etc.)		Names of Producing Formations		Top Oil/Gas Pay		Tubing Depth			
Productions						Depth Casing Shoe			
TUBING, CASING AND CEMENTING RECORD									
HOLE SIZE		CASING & TUBING SIZE		DEPTH SET		BACKS CEMENT			

V. TEST DATA AND REQUEST FOR ALLOWABLE			
CIL WELL (Test must be after recovery of fluid column of fluid column must be equal to or exceed top of casing for oil depths or 10' for gas depths)			
Date First Flow Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Close Size AUG 1 0 1993
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - Mcf OIL CON. DIV. DIST. 3

GAS WELL			
Actual Prod. Test - Mcf/D	Length of Test	Bottom Casing Pressure (BSCP)	Gravity of Condensate
Testing Method (pump, back pr.)	Tubing Pressure (psia)	Casing Pressure (psia)	Close Size

VI. OPERATOR CERTIFICATE OF COMPLIANCE	
I hereby certify that the rules and regulations of the Oil Conservation Division have been read and that the information given herein is true and complete to the best of my knowledge and belief.	
Signature Sunny Longo	Title PRESIDENT
Printed Name SUNNY LONGO	Telephone No. (505) 625-0204
Date 8/9/93	

OIL CONSERVATION DIVISION	
Date Approved AUG 1 0 1993	
By [Signature]	SUPERVISOR DISTRICT #3
This	

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104
1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
2) All sections of this form must be filled out for allowable on new and recompleted wells.
3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
4) Separate Form C-104 must be filed for each pool in multiply completed wells.