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NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS	
Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65	
B.K.	

Operator	Noel Reynolds D.B.A. Torreon Oil Co.		
Address	Box 356 Flora Vista, N.M. 87415		
Reason(s) for filing (Check proper box)	Other (Please explain)		
New Well <input checked="" type="checkbox"/>	Change in Transporter of:		
Recompletion <input type="checkbox"/>	Oil <input checked="" type="checkbox"/>	Dry Gas <input type="checkbox"/>	
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/>	Condensate <input type="checkbox"/>	

If change of ownership give name  
and address of previous owner

#### DESCRIPTION OF WELL AND LEASE

Lease Name San Luis Federal	Well No. 3	Pool Name, including Formation San Luis Mesa Verde	Kind of Lease State, Federal or Fee Federal	Lease No. SF081160-F
Location				
Unit Letter J	2164	Feet From The South	Line and 1600	Feet From The East
Line of Section 21	Township 18 N	Range 3 W	, NMPM, Sandoval County	

#### DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Thrift-Way Company	P.O. Box 1367 Farmington, N.M. 87401					
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 J	Sec. 21	Twp. 18N	Rge. 3W	Is gas actually connected? None	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 X	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'tv.	Diff. Res'tv.
Date Spudded 8/6/78	Date Compl. Ready to Prod. 8/12/78	Total Depth 606	P.B.T.D.					
Elevations (DF, RKB, RT, GR, etc.) 6690	Name of Producing Formation Menefee	Top Oil/Gas Pay 595	Tubing Depth 604					
Perforations Slotted Liner 569 to 606	Depth Casing Shoe							
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
8 5/8	7in.	31 ft.	Circulated					
6 1/4	4.50	606	No cement, Ran Baker Umbrella 35 ft. off bottom.					

#### 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 8/12/78	Date of Test 8/24/78	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hr.	Tubing Pressure 0	Casing Pressure 0	Choke Size
Actual Prod. During Test 15 bbl.	Oil-Bbls. 15 bbl	Water-Bbls. 0	Gas-MCF TSTM

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 Size

#### CERTIFICATE OF COMPLIANCE

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.

Noel Reynolds  
Operator  
10-26-78  
(Signature)  
(Title)  
(Date)

#### OIL CONSERVATION COMMISSION

APPROVED \_\_\_\_\_, 19\_\_\_\_  
BY Original Signed by A. R. \_\_\_\_\_  
TITLE \_\_\_\_\_

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 completed wells.