	NO. OF CHPIES RECEIVED			5	
	DISTRIBUTION				
	SANTA FE		17		
	FILE		1.7	7	_
	U.S.G.S.				
	LAND OFFICE				
1.	IRANSPORTER	OIL	$\perp \perp$		
	, want on En	GAS			
	OPERATOR				
	PRORATION OFFICE			لــــــــــــــــــــــــــــــــــــــ	_
	Operator Dom	e Pet	rol	eum C	:0
		501 Airport Dr			9

August 1, 1978

(Dute)

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-104

	SANTA FE	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-1. Elloctivo 1-1-65	
	FILE				
	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS			GAS NY	
	LAND OFFICE	-		16 1C	
	TRANSPORTER GAS			100	
	OPERATOR 2				
ı.	PRORATION OFFICE				
	Dome Petroleu	n Corp.	•		
	<u> </u>	rive, Suite 107			
	Farmington, NI	•			
	Reason(s) for filing (Check proper b		Other (Please explain)		
	New We!1	Change in Transporter of:			
	Recompletion	OII Dry G	ensate		
	Change in Ownership	Cashigheda Gas [
	If change of ownership give name and address of previous owner				
	and address of previous owner				
11.	DESCRIPTION OF WELL AND	Vell No. Pool Name, Including I	Formation Kind of Lea	ise Lease No.	
	Santa Fe - Leggs	2 Leggs - E			
	Location	2080 =			
	Unit Letter N ;	990 Feet From The South Li	ne and 2310 Feet From	n The West	
		•		•	
	Line of Section 11 7	ownship 21N Range	10W , ммрм, San	Juan County	
		OTED OF OUT AND MATURAL C	A C		
П.	Name of Authorized Transporter of C	RTER OF OIL AND NATURAL GA	Address (Give address to which app	roved copy of this form is to be sent)	
	Permian Corporation	-	P.O. Box 1183, Houston	, Texas 77001	
	Name of Authorized Transporter of C	asinghead Gas or Dry Gas	Address (Give address to which app	roved copy of this form is to be sent)	
				N	
	If well produces oil or liquids,	Unit Sec. Twp. P.ge. N 11 21N 10W	Is gas actually connected? , W	/hen	
	give location of tanks.				
		with that from any other lease or pool,	give commingling order number:		
· V .	COMPLETION DATA	Oll Well Gas Well	New Well Workover Deepen	Plug Back Same Resty. Diff. Resty.	
	Designate Type of Complet	1	1 1 1	1 1 .	
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
	7/4/78	7/26/78	5632	5564 Tubing Depth	
	Elevations (DF, RKB, RT, GR, etc., 6379' GR	Name of Producing Formation Entrada	Top Oil/Gas Pay 5415	3019	
		Billiorada	1 3.23	Depth Casing Shoe	
	5415 - 5422	Perforations 5415 - 5422		5584	
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
	12 1/4"	9 5/8", 32.3#	195'	150 sacks	
	8 3/4"	7", 23# & 20#	5584'	950 (2 stage)	
	•	2 7/8", 6.5#	3019'		
		COD ALLOWARIE (Tree must be	ofter recovery of total volume of load of	il and must be equal to or exceed top allow	
V.	TEST DATA AND REQUEST :	able for this d	epsh or be for full 24 hours)		
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas	lift, etc.)	
	7/26/78	7/28/78	Pumping Casing Pressure	Choke Size	
	Length of Test	Tubing Pressure	Casing Pressure	7211211	
	24 hours Actual Pred, During Test	Ott - Bbls.	Water-Bble.	Gas-MCF	
	573 bbls	62	511		
				011-001	
	GAS WELL			Oll	
i	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
		Tubing Pressure (Shut-in)	Cosing Pressure (Shut-in)	Choke Size	
	Testing Method (putot, back pr.)	Tubing Pressure (Bhut-in)	Casing Financia (Casa)		
			OIL CONSERV	ATION COMMISSION	
ïI.	CERTIFICATE OF COMPLIA	NCE .	AII6 1 1973		
	I have by contify that the rules on	regulations of the Oil Conservation	45050450		
	Commission have been complied	with and that the information given	By Original Signed 67 % To Kandrick		
	shove is true and complete to t	he beat of my knowledge and belief.	TITLE SUPERVISOR DATE #		
			11		
	1	•	This form is to be filed in compliance with RULE 1104. If this is a request for silowable for a newly drilled or despend		
	J. Arnold Small (Sig	Butter	I see the form rough to accome	ranied by a labulation of the deviation	
•			I there taken on the well in accordance with note itte		
	Drilling & Production		All sections of this form n	nust be filled out completely for allow wells.	
	<i>{</i> }	Title)	II whise on new and terministered		

able 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 Forces C-104 must be filed for each pool in multiply