Submit 5 Copies
Appropriate District Office
DISTRICT 1
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico
Energy, Minerals and Natural Resources Department

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

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

I.		TO TR	ANS	PORT O	IL AND NA	TURA	L GAS						
Operator Southern Union Explo				Well	API No.								
Address					0.4			1					
324 Hwy US64, NBU300 Reason(s) for Filing (Check proper box)	J1 Fa	rmingt	on,	NM 874		or (Plans	e explain)						
New Well		Change i	o Tran	sporter of:		ici (i ieus	e explain,						
Recompletion	Oil		Dry										
Change in Operator	Casinghea	ad Gas _	Con	densate 🔀									
and address of previous operator													
II. DESCRIPTION OF WELL	AND LE	ASE											
Lease Name Jicarilla K	1					ding Formation in Dakota					Lease No. Contract 145		
Location Unit LetterE	:	1455	Feet	From The	North Lin	e and	104	5 F	eet From The	Wes	t ,	Line	
Section ² Townshi	p 25	5	Rang	-		мрм,		Arrib			Count		
III. DESIGNATION OF TRAN	SPORTE	R OF O		ND NATU									
Name of Authorized Transporter of Oil	Address (Give address to which approved copy of this form is to be sent)												
Giant Refining Compa Name of Authorized Transporter of Casing	Post Off				Farmington, NM 87499 copy of this form is to be sent)								
Gas Company of New M			0. 2.	ry Gas XXX	Post Off							3	
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge	. Is gas actuall			When					
If this production is commingled with that IV. COMPLETION DATA	from any oth	ner lease or	pool,	give comming	ling order num	er:							
Designate Type of Completion	- (X)	Oil Well		Gas Well	New Well	Worko	ver I	Эеереп	Plug Back	Same Res'v	Diff Re	s'v	
Date Spudded	Date Compl. Ready to Prod.			Total Depth	I		P.B.T.D.						
levations (DF, RKB, RT, GR, etc.) Name of Producing Formation					Top Oil/Gas Pay				Tubing Depth				
Perforations	J				Depth Casing Shoe								
									'	·			
	T	UBING,	CAS	ING AND	CEMENTI	IG RE	CORD						
HOLE SIZE	CAS	SING & TU	JBING	SIZE	DEPTH SET					SACKS CEMENT			
									-	· · · · · · · · · · · · · · · · · · ·			
					 				f				
V. TEST DATA AND REQUES					4			i. In Can dhi	ري در اداد د ما در اداد	G 24 b			
OIL WELL (Test must be after re Date First New Oil Run To Tank	Date of Tes		oj 10ac	i ou ana mus	Producing Me	exce ga ile thod (Fle	m, pimp,	gas lift e	racpin or be j	er july 24 not	<i>US.)</i>]	
Length of Test	Tubing Pressure				Casing Pressure				Choke Size				
Actual Prod. During Test	Oil - Bbls.				Water - Bbis.				Gas- MCF				
CACAVELI					<u></u>				[
GAS WELL Actual Prod. Test - MCF/D	Length of Test				Bbls. Condensate/MMCF				Gravity of Condensate				
					Doin Concension III.								
lesting Method (pitot, back pr.)	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)				Choke Size				
VI. OPERATOR CERTIFICA Thereby certify that the rules and regula				NCE	C	IL C	ONSE	ERV	NOIT <i>A</i>	DIVISIO	NC		
Division have been complied with and the istrue and complete to the best of my known and the second	Date Approved DEC 2 3 1991												
Linda Privet						= $=$ $=$ $=$ $=$ $=$ $=$ $=$ $=$ $=$							
Signiture Linda Murphy	By Stanks Save												
Printed Name 1/1/92	Title_		SUPER	VISOR	DISTRIC	T#3							
Date	· · · · · ·	27-448 Tele _l	phone	No.									

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.