TOP HIN DIA TON	MLD L)CF	477 []	ALCIA
** ** (***** ***				1
DISTRIBUTION				
SANTA FE				
PILE				
u.s.c.s.				
LAND OFFICE				
TRANSPORTER	OIL			
	GAS			
OPERATOR				

OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

	TRANSPORTER OIL GAS	TRANSPORTER OIL REQUEST FOR ALLOWABLE							
1	OPERATOR PROPATION OFFICE	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS							
	APACHE CORPORATION Address 1700 LINCOLN, #4900, DENVER, COLORADO 80203-4549								
	Reason(s) for filing (Check proper bo		Other (Ple	ase explain)	· · · · · · · · · · · · · · · · · · ·				
	Recompletion	Change in Transporter of: Oil Dry C	Gas 🗍						
	Change in Ownership X	Casinghead Gas Cond	ensate						
	If change of ownership give name and address of previous owner	Cotton Petroleum Corpor	cation, 3773 Che	erry Creek					
I	. DESCRIPTION OF WELL AND	CRIPTION OF WELL AND LEASE Well No. Fool Name, including Formation Kind of Lease Lease No. Leas							
	APACHE	154	ALLUP-DAKOTA W.	Kind of Leas State, Feder		127			
	Location PEDERAL					_1			
	Unit Letter 0 : 990' Feet From The South Line and 2310' Feet From The East								
	Line of Section 3 To	ownship 24N Range	4W , NMI	PM, RIO	ARRIBA	County			
Ш	. DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL G	AS						
	Name of Authorized Transporter of Ct.	Address (Give address to which approved copy of this form is to be sent)							
	GIANT REFINING Name of Authorized Transporter of Ca		P.O. BOX 256 - FARMINGTON, NM 87499 Address (Give address to which approved copy of this form is to be sent) P.O. BOX 1492 - EL PASO, TX 79978						
	EL PASO NATURAL								
	If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually conne		ien				
	qive location of tanks.	24N 4W	YES						
IV	If this production is commingled wind COMPLETION DATA	ith that from any other lease or pool,							
-	Designate Type of Completic	on - (X) Gas Well	New Well Workove	Deepen	Plug Back Same Re	s'v. Diff. Res			
	Date Spudded	Date Compl. Ready to Prod.	Total Depth		P.B.T.D.	<u>i</u>			
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Cil/Gas Pay		Tubing Depth				
	Perforations		<u></u>		Depth Casing Shoe				
		TUBING, CASING, AND CEMENTING RECORD							
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		SACKS CEMENT				
-									
v.	V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or								
	OIL WELL able for this de Date First New Oil Run To Tanks Date of Test		epth or be for full 24 hours) Producing Method (Flow, pump, gas li		ft, etc.j				
		Tubing Pressure	Casing Pressure		Choke Size	 			
	Length of Test	tuning Pressure	Connection of the control of the con		Choice Sile				
	Actual Prod. During Test	Oil-Bbis.	Water - Bbis.	00720	Gas - MCF				
					1				
	GAS WELL		**************************************						
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MM	CF CF	Gravity of Condensate				
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)		Choke Size				
	CERTIFICATE OF COMPLIANC		OIL CONSERVATION DIVISION 1986						
	I hereby certify that the rules and ro Division have been complied with	TITLE SUPERVISOR DISTRICT S. This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepene well, this form must be accompanied by a tabulation of the deviation							
	above is true and complete to the								
	A: 1 m								
	NAMA III TU								
	Operation	as Emore	tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for allow						
_	/ / /Tiv l	(a.l. :				-			

(Date)

Fill out only Sections I. II. III, and VI for changes of ownewell name or number, or transporter, or other such change of condition

Separate Forms C-104 must be filed for each pool in multiple completed wells.