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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

Operator Flag-Redfern Oil Company	
Address Box 234, Farmington, N. M. 87401	
Reason(s) for filing (Check proper box)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Re-completion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Other (Please explain)	

If change of ownership give name  
and address of previous owner

## II. DESCRIPTION OF WELL AND LEASE

Lease Name Gentle	Well No. 3	Pool Name, including Formation Pinon Fruitland	Kind of Lease State, Federal or Fee	Lease No. NM 010063
Location				
Unit Letter P	880	Feet From The south	Line and 820	Feet From The east
Line of Section 8	Township 28N	Range 11W	NMPM, San Juan County	

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

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
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)					
El Paso Natural Gas Co.	Box 990, Farmington, N. M. 87401					
If well produces oil or liquids, give location of tanks.	Unit P	Sec. 8	Twp. 28N	Rge. 11W	Is gas actually connected?	When

If this production is commingled with that from any other lease or pool, give commingling order number:

## IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		X	X					
Date Spudded 7/29/71	Date Compl. Ready to Prod. 8/10/71		Total Depth 1715'		P.B.T.D. 1626'			
Elevations (DF, RKB, RT, GR, etc.) 5594' Gr.	Name of Producing Formation Fruitland		Top Oil/Gas Pay 1311'		Tubing Depth 1360'			
Perforations 1311'-15', 1334'-46'					Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE		CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT		
12 1/4"		8 5/8"		146'		75 SX.		
6 3/4"		5 1/2"		1715'		225 SX.		

V. TEST DATA AND REQUEST FOR ALLOWABLE  
OIL WELL

(Test must be after recovery of total volume of load oil and must be allowed to exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
		OIL CON. COM. DIST. 3	

## GAS WELL

Actual Prod. Test-MCF/D 1675	Length of Test 3 hrs.	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.) One pt. back press.	Tubing Pressure (shut-in) 517	Casing Pressure (shut-in) 517	Choke Size 3/4"

## VI. 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.

Original signed by A. M. Deane

Engineer

10/13/71

(Signature)

(Title)

(Date)

## OIL CONSERVATION COMMISSION

OCT 14 1971

APPROVED \_\_\_\_\_, 19

BY Original Signed by Emery C. Arnold

SUPERVISOR DIST. #3

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 allow-  
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 Forms C-104 must be filed for each pool in multiply  
completed wells.