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SANTA FE		
FILE		
J.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

7-17-81

(Date)

NEW MEXICO OIL CONSERVATION/COMMISSION

Form C-104
Supercodes Old C-104 and C-110

SANTA FE	REQUES	T FOR ALLOWABLE	Effective 1-1-65
FILE		AND AND NATURAL	CAS
U.S.G.S.	- AUTHORIZATION TO TE	RANSPORT OIL AND NATURAL	. GAS
OIL	-		
TRANSPORTER GAS	-		
OPERATOR	7		
PRORATION OFFICE			
Operator			
Energy Reser	rves Group, Inc.		
Address	200		
	280, Casper, Wy. 82302	Other (Please explain)	
Reason(s) for filing (Check proper bo	x) Change in Transporter of:	Other I tease explains	
New We!!	_	Gas	
Recompletion		densate	
Change in Ownership			
If change of ownership give name			
and address of previous owner			
DESCRIPTION OF WELL AND	LEASE		
Lease Name	Well No. Pool Name, Inc.uding		
Gallegos Canyon Unit	314 West Kutz Pi	ct. Cliffs State, Fed	eral or Fee Federal SF-0781
Location			
Unit Letter F : 15	80 Feet From The North	Line and <u>1560</u> Feet Fro	om The West
	207	10W , NMPM, Sar	n Juan County
Line of Section 17 T	ownship 28N Range	12W , NMPM, Sar	ı odan
	TER OF OH AND NATIRAL	GAS	
Name of Authorized Transporter of C	RTER OF OIL AND NATURAL or Condensate	Address (Give address to which ap	proved copy of this form is to be sent)
traine of Authorizon 11211aportor of 6			
Name of Authorized Transporter of C	asinghead Gas or Dry Gas 🔀	Address (Give address to which ap	proved copy of this form is to be sent)
El Paso Natural Gas C		P.O. Box 1492, El Pas	so. Texas 79978
	Unit Sec. Twp. Rge.	Is gas actually connected?	When
If well produces oil or liquids, give location of tanks.		No	W.O. Pipeline
That is an election is commingled to	with that from any other lease or po	ol, give commingling order number:	-
COMPLETION DATA			Plug Back Same Res'v. Diff. Res
Designate Type of Complete	ion - (X)	New Well Workover Deepen	Flag Back Same New York
		Total Centh	P.B.T.D.
Date Spudded	Date Compl. Ready to Prod.	Total Depth	1670'
3-3-81	7-13-81 Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
Elevations (DF, RKB, RT, GR, etc.,		1452!	1485!
5648 GL; 5650 KB	Pictured Cliffs	1 1452	Depth Casing Shoe
P C 1460-691 1/1 TCD	F(QPonfa) Fnuitland 114	0'-46' 1164'-66' 1177	'_79' _W /1JSPF (13 Perfs)
1.C. 1400-08 W/I 051	TUBING, CASING,	AND CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
9-7/8"	7"	125'	65 sx "B" & additives
6-1/4"	4-1/2"	1711'	250 sx. 50-50 Pozmix
	2-3/8"	1485'	8 additives
TEST DATA AND REQUEST	FOR ALLOWABLE (Test must	be after recovery of total volume of load s depth or be for full 24 hours)	oil and must be equal to or exceed top al
OIL WELL	Date of Test	Producing Method (Flow, pump, go	is lift, etc.)
Date First New Oil Run To Tanks	Date of feat		
	Tubing Pressure	Casing Pressure	Choke Sign
Length of Test			KLLIVA
Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	Gas MCF
Actual From Land	/		JUL 2 0 1001
			OIL CON ON
GAS WELL *Tested w/or	ifice well tester thru	test separator	COM.
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Col Sinate
311	24 Hrs.	Casing Pressure (Shut-in)	Choke Size
Testing Method (pitot, back pr.)	Tubing Pressure		1/2"
*See above note	85 psi	200 psi	
. CERTIFICATE OF COMPLIA	NCE	OIL CONSER	RVATION COMMISSIONS
			JUL ~ 19
	d regulations of the Oil Conservat	ion	
	the best of my knowledge and beli		
age to the time to the same		fi	STEEL STORY
	•	TITLE	and the same and a same as a same
<u> </u>	10.	This form is to be filed	in compliance with RULE 1104.
India	h Kos		allowable for a newly drilled or deepe ompanied by a tabulation of the devia
(S	ignature)	il same taken on the Well 10 C	ICCOLGRUCA MITH MARK
	Clerk	All sections of this formable on new and recomplete	m must be filled out completely for al
	(Title)	if ahie on new and recomplete	M 4414

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. able on new and recompleted wells.