1.	DISTRIBUTION 7 NEW MEXICO OIL CONSERVATION COMMISSION Form C-104 REQUEST FOR ALLOWABLE Supersedes Of C-104 and C-7. AND U.S.G.S. LAND OFFICE TRANSPORTER OIL / GAS						
	Addreva						
	Reason(s) for filing (Check proper box) New Well Reconcletion Change in Ownership	Change in Transporter of: Oil Dry Ga Casinghead Sas Conder	s E	ame cha	nge		
	If change of ownership give name and address of previous owner						
11.	DESCRIPTION OF WELL AND I	LEASF					
	Lease Name Calloway	Well No. Fool Name, Including F	1	(Ind of Lease State, Federal	or Fee Fee .		
<u>.</u>	Location				Wast		
	Unit Letter C; 1020 Feet From The North Line and 1850 Feet From The West						
	Line of Section 22 Township 31N Ronge 11W , NMFM, San Juan County						
HI.	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA	AS Address (Give address to	which approve	ed copy of this form is to be sent)		
	Plateau, Inc. Box 108, Farmington, New Mexico Flore of Authorized Transporter of Cusinghead Gas of the San						
	Southern Union Gathering Box 1899, Bloomfield, New Mexico						
	if well produces oil or liquide,	Unit Sec. Dwp. Rge.	is gan dotually connected	? Wher			
	give location of tanks. If this production is commingled wit	to the form any other lease or pool	give commingling order	number:			
IV.	COMPLETION DATA	Oil Well Gas Well	New Well Workover	Deepen	Plug Back Same Resty, Diff. Resty,		
	Designate Type of Completio		New Well	1			
	Date Spudded	Date Compl. Ready to Prod.	Total Depth		P.B.T.D.		
	Elevations (D.F., R.L.B., R.T., GR., etc.)	Name of Producing Formation	Top Oil/Gas Pay		Tubing Depth		
	Perforations				Depth Casing Shoo		
	TUBING, CASING, AND CEMENTING RECORD						
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SE		SACKS CEMENT		
V.	TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)						
	Dute First New Oil Bun To Tanks	Date of Test	Producing Method (Flow,	pump, ets lift	g eto.		
	Length of Test	Tubing Pressure	Casing Pressure	TALL	Choke Size		
	Actual Prod. During Test	Otto Bols.	Water-Bbls.	- 11/1/1	Gas-MCF		
			<u> </u>	VOIL CON			
	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls, Condensate/MMCF		Gravity of Condensate		
	Teating Method (pitos, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-	in)	Choke Size		

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.

District Production Mgr.

(Tille)

1-1-78

(Date)

OIL CONSERVATION COMMISSION

JAN 1 2 1978

Original Signed by A. R. Kendrick

SUPERVISOR DIST. 43 TITLE .

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a nawly drilled or deepened well, this form must be accompanied by a tabulation of the deviation thats taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sactions 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.

NO. OF COPIES RECEIVED					
DISTRIBUTIO					
SANTA FE					
FILE					
U.S.G.S.					
LAND OFFICE					
TRANSPORTER	OIL				
TRANSPORTER	GAS				
OPERATOR					

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-104

	SANTA FE	REQUEST F	FOR ALLOWABLE	Supersedes Old C-104 and C-110 Effective 1-1-65			
}	FILE	**************************************	AND NSPORT OIL AND NATURAL GA	A C			
}	U.S.G.S.	AUTHORIZATION TO TRAF	NSFORT OIL AND NATURAL G	~3			
ł	lou						
	TRANSPORTER GAS						
	OPERATOR						
1.	PRORATION OFFICE						
	Southland Royalty Company						
	Address P. O. Drawer 570, Farmington, New Mexico 87499						
	Reason(s) for filing (Check proper box)	Change in Transporter of:	Omer (1 sease explans)				
	New Well Recompletion	Cil Dry Gas					
	Change in Ownership	Casinghead Gas Condens	Effective August	1, 1984			
	If change of ownership give name and address of previous owner						
	DESCRIPTION OF WELL AND	FACE	·				
11.	DESCRIPTION OF WELL AND I	Well No. Pool Name, Including For		Lease No.			
	Calloway	1A Blanco Mesa	sverde State, Federal	or Fee FFE			
	Location		1850	na West			
	Unit Letter C; 102	O Feet From The North Line	and 1850 Feet From T	ne west			
	Line of Section 22 Tow	mship 31N Range	11W , NMPM, San	Juan County			
			_				
III.	DESIGNATION OF TRANSPORT	or Condensate XX	S Address (Give address to which approv	ed copy of this form is to be sent)			
	Giant Refining Comp	<u> </u>	P.O. Box 9156, Phoenix	, Arizona 85068			
	Name of Authorized Transporter of Cas	inghead Gas or Dry Gas	Address (Give address to which approv	ed copy of this form is to be sent)			
	Southern Union Gath	ering		ield. New Mexico 87413			
	If well produces oil or liquids,	Unit Sec. Twp. P.ge.	Is gas actually connected? Whe	n			
	give location of tanks.		in a series in the series number				
137	If this production is commingled with that from any other lease or pool, give commingling order number:						
3 ♥ .	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.			
	Designate Type of Completion	1	Total Depth	P.B.T.D.			
	Date Spudded	Date Compl. Ready to Prod.	10141 20111				
	Elevations (DF, RKB, RT, GR, etc.,	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth			
				Depth Casing Shoe			
	Perforations			Septin Gazang Since			
		TUBING, CASING, AND	CEMENTING RECORD				
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT			
	<u> </u>	1					
97	TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a)	fter recovery of total volume of load oil	and must be equal to or exceed top allow-			
٧.	OIL WELL	able for this de	pth or be for full 24 hours) Producing Method (Flow, pump, gas lij				
•	Date First New Cil Run To Tanks	Date of Test	Producting Mathod (1 100) Parity Bar 17	, , , , ,			
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size			
	Langua di 1991			Gas - MCF			
	Actual Prod. During Test	Oil-Bbis.	Water - Bbis.	Gds - MCF			
	CAS HELL						
	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate GMMCF	Gravity of Condensate			
			Casing Pressure (Shut-in)	Choke Size			
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Piess de Casas				
	The second is a second in the second is a second in the se	CE	OIL CONSERVA	ATION COMMISSION			
54	. CERTIFICATE OF COMPLIANCE		0 1111 1 1,100/				
	i hereby certify that the rules and regulations of the Oil Conservation		APPROVED TO THE STORY				
	Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		BY Dranker Surge				
	above to true and sampless in the		TITLE	SUPERVISOR DISTRICT & 3			
	^	4		compliance with RULE 1104.			
	∀. + +	Alexan.		This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepened			
	(Sign	lature) O O	well, this form must be accompanied by a tabulation of the determinant tests taken on the well in accordance with RULE 111.				
	Secretar						
	7-10-84		able on new and recompleted wells.				
	1-10	ate!	well name or number, or transporter, or other seen officers				
(Date)			Separate Forms C-104 must be filed for each pool in multiply				