## DISTRIBUTION SANTATE FILE U.S.G.S. LAND OFFICE OIL TRAL PORTER GAS OPERATOR

NEW MEXICO OIL, CONSERVATION COMMISSION Porm C-104 Supersedes Old C-104 and C-110 REQUEST FOR ALLOWABLE Effective 1-1-65 AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS API 30-045-22852 PRORATION OFFICE Operator Southland Royalty Company Address P. O. Drawer 570, Farmington, New Mexico Reason(s) for filing (Check proper box) Other (Please explain)  $\mathbf{X}$ New Well Change in Transporter of: Dry Gos Recompletion Casinghead Gas Condensate Change in Ownership f change of ownership give name nd address of previous owner. DESCRIPTION OF WELL AND LEASE Well No. Pool Name, Including Formation Kind of Lease Lease No. Lease Name State, Federal or Fee SF-078147 2A Blanco Mesa Verde Decker Location 1075 East Feet From The South Line and 1700 Feet From The Unit Letter 32N San Juan 12W , NMPM, County 26 Range Township DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be sent) or Condensate X Name of Authorized Transporter of Oil P. O. Box 108, Farmington, New Mexico
Address (Give address to which approved copy of this form is to be sent) Plateau, Inc. Name of Authorized Transporter of Casinghead Gas or Dry Gas XX O. Box 1899, Bloomfield, New Mexico Southern Union Gathering Company When Is gas actually connected? Sec. <sup>T</sup> Unit If well produces oil or liquids, give location of tanks. No f this production is commingled with that from any other lease or pool, give commingling order number: COMPLETION DATA Plug Back Same Besty, Diff. Resty. Gas Well Deepen Oil Well Designate Type of Completion -(X)Total Depth Date Compl. Ready to Prod. Date Spudded 5613 5650' 2-20-78 6 - 4 - 78Tubing Depth Name of Producing Formation Top Oil/Gas Pay Elevations (DF, RKB, RT, GR, etc.) <u>5556</u>1 5172' Mesa Verde 64891 Depth Casing Shoe Perforations 56381 5172' - 5570' TUBING, CASING, AND CEMENTING RECORD SACKS CEMENT DEPTH SET CASING & TUBING SIZE HOLE SIZE 110 sacks 2201 12-1/4" 9-5/8" 711 33281 315 sacks 8-3/411 4-1/2" 3174-5638<sup> '</sup> 315 sacks 6-1/4" 2-3/8" 5556 TEST DATA AND REQUEST FOR ALLOWABLE (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) OIL WELL Producing Method (Flow, pump, gas lift, etc.) Date of Test Date First New Oil Run To Tanks Choke Size Casing Pressure Tubing Pressure Length of Test Gas - MCF Water - Bole. Actual Prod. During Tost Otl - Bbla.

GAS WELL Actual Prod. Test-MCF/D	Length of Test	. Bbls. Condensate/MMCF	Gravity of Condensate	
4.420	3 Hrs.			
Testing Mothed (pitot, back pr.)	Tubing Prossure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
Back Pressure	851 psig	328 psig	3/4"	
CERTIFICATE OF COURTINGE		OIL CONSER	OIL CONSERVATION COMMISSION	

APPROVED.

TITLE

## 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.

Otto 18 1100 and complete to the
(a) fan Kran
(Signature)
District Production Manager
(Title)

7-11-78

(Date)

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

UPER IISOR LIST. 30

FFH 1 & 1079

Original Signed by A. R. Kendrick

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 NULE 111.

All sections of this form must be filled out completely for allowable 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.