	-			
NO. OF COPIES RECEIVED				
DISTRIBUTION	NEW	MEXICO OIL C	ONSERVATION COMMISSION	Form C-104
SANTA FE	_	REQUEST	FOR ALLOWABLE TOLERS	Supersedes Old C-104 and GFT+05 $_{\odot}$ Effective 1-1-65
J.S.G.S.	ALITHODIZA	ATION TO TO	AND ANSPORT OIL AND NATURA	Δ1 GΔS
LAND OFFICE	AUTHORIZA	ATION TO TRA	ANSPORT OIL AND NATURA	Tar Phics
RANSPORTER GAS				ա անա լու ՄՈ
OPERATOR				
PRORATION OFFICE				
operator Cities Servic	e 011 Company			
Address	lobbs, New Mexi	ica 88240		
Box 69 - H			Other (Please explain)	
lew Well	Change in Trans	sporter of:		
decompletion	Oil	Dry Go	rs	
Thange in Ownership	Casinghead Gas	s Conde	nsate	
change of ownership give name nd address of previous owner				
ESCRIPTION OF WELL AND) LEASE		tme, Including Formation	Kind of Lease
State AD		9 Mesc	alero San Andres	State, Federal or Fee \$216
ocation				
Unit Letter 6; 19	980 Feet From The	$_{ ext{ iny North}}$ $_{ ext{ iny L}_{ ext{i}}}$	ne and 2310 Feet F	From The East
			32E , NMPM,	Lea C
Line of Section 23 , To	ownship 108	Range	32 E , NMPM,	
DESIGNATION OF TRANSPO	RTER OF OIL AND	NATURAL G	48	approved copy of this form is to be sent
DESIGNATION OF TRANSPOL Name of Authorized Transporter of O	RTER OF OIL AND	NATURAL G	AS Address (Give address to which a	
DESIGNATION OF TRANSPOL Name of Authorized Transporter of O	RTER OF OIL AND	NATURAL G	AS Address (Give address to which a	
DESIGNATION OF TRANSPOL Name of Authorized Transporter of O	RTER OF OIL AND Dil X or Condens eline Company Casinghead Gas	NATURAL G	AS Address (Give address to which to Box 900 - Dalla Address (Give address to which to be address to which the address to be address to which the address to which the address to which the address to be address to the address to the address to the address to be address to the address to be address t	\$ 21, T_CXAS approved copy of this form is to be sent
DESIGNATION OF TRANSPOI Name of Authorized Transporter of O Magnolia Pipe Name of Authorized Transporter of O None	RTER OF OIL AND or Condens eline Company Casinghead Gas	or Dry Gas Trwp. Rge.	AS Address (Give address to which a Box 900 - Dalla Address (Give address to which a lis gas actually connected?	s 21, T _e xas
DESIGNATION OF TRANSPORMATION	RTER OF OIL AND or Condens eline Company Casinghead Gas	or Dry Gas Trwp. Rge.	AS Address (Give address to which a Box 900 - Dalla Address (Give address to which a large addr	approved copy of this form is to be sens
DESIGNATION OF TRANSPORMATION	RTER OF OIL AND or Condens eline Company Casinghead Gas	or Dry Gas Trwp. Rge.	AS Address (Give address to which a Box 900 - Dalla Address (Give address to which a large addr	approved copy of this form is to be sens
DESIGNATION OF TRANSPORMATION	RTER OF OIL AND or Condens eline Company Casinghead Gas	or Dry Gas Trwp. Rge. 10\$ 32E her lease or pool	AS Address (Give address to which a Box 900 - Dalla Address (Give address to which a large addr	approved copy of this form is to be sens
DESIGNATION OF TRANSPORMATION	RTER OF OIL AND Oil X or Condens eline Company Casinghead Gas o Unit Sec. B 23 with that from any oth	or Dry Gas Trwp. Rge. 10\$ 32£ her lease or pool	AS Address (Give address to which a Box 900 - Dalla Address (Give address to which a large addr	approved copy of this form is to be sense. When Plug Back Same Restv. Diff.
DESIGNATION OF TRANSPORMATION	RTER OF OIL AND or Condens eline Company Casinghead Gas	or Dry Gas Trwp. Rge. 10\$ 32£ her lease or pool	AS Address (Give address to which a Box 900 - Dalla Address (Give address to which a list gas actually connected? No. give commingling order number	approved copy of this form is to be sens
DESIGNATION OF TRANSPORMATION	RTER OF OIL AND or Condens eline Company Casinghead Gas o Unit	or Dry Gas Trwp. Rge. 10\$ 32E Rer lease or pool to Prod.	AS Address (Give address to which a Box 900 - Dalla Address (Give address to which a large addr	when Plug Back Same Restv. Diff. P.B.T.D.
DESIGNATION OF TRANSPORMATION	RTER OF OIL AND Oil X or Condens eline Company Casinghead Gas o Unit Sec. B 23 with that from any oth	or Dry Gas Trwp. Rge. 10\$ 32E Rer lease or pool to Prod.	AS Address (Give address to which a Box 900 - Dalla Address (Give address to which a large addr	approved copy of this form is to be sense. When Plug Back Same Restv. Diff.
DESIGNATION OF TRANSPORMATION	RTER OF OIL AND or Condens eline Company Casinghead Gas o Unit	or Dry Gas Trwp. Rge. 10\$ 32E Rer lease or pool to Prod.	AS Address (Give address to which a Box 900 - Dalla Address (Give address to which a large addr	when Plug Back Same Restv. Diff. P.B.T.D.
DESIGNATION OF TRANSPORMATION	RTER OF OIL AND or Condens eline Company Casinghead Gas o Unit	or Dry Gas Trwp. Rge. 10\$ 32E Rer lease or pool to Prod.	AS Address (Give address to which a Box 900 - Dalla Address (Give address to which a large addr	approved copy of this form is to be sense. When Plug Back Same Restv. Diff. P.B.T.D. Tubing Depth
DESIGNATION OF TRANSPORMATION	RTER OF OIL AND Oil X or Condens eline Company Casinghead Gas o Unit Sec. B 23 with that from any oth tion - (X) Date Compl. Ready Name of Producing	or Dry Gas Trwp. Rge. 108 32E ner lease or pool to Prod. Formation	AS Address (Give address to which a Box 900 - Dalla Address (Give address to which a large addr	approved copy of this form is to be sense. When Plug Back Same Restv. Diff. P.B.T.D. Tubing Depth
DESIGNATION OF TRANSPORMATION	RTER OF OIL AND or Condense eline Company Casinghead Gas o Unit	or Dry Gas Trwp. Rge. 108 32E ner lease or pool to Prod. Formation	Address (Give address to which a Box 900 - Dalla Address (Give address to which a list gas actually connected? No give commingling order number New Well Workover Deeper Total Depth Top Oil/Gas Pay	approved copy of this form is to be sense. When Plug Back Same Restv. Diff. P.B.T.D. Tubing Depth
DESIGNATION OF TRANSPORMATION	RTER OF OIL AND or Condense eline Company Casinghead Gas o Unit	or Dry Gas Well Drod. Twp. Rge. Rge. Gas Well Dry Gas Well Drod. Formation Roy Gas Well Dry Gas	AS Address (Give address to which of Box 900 - Dalla Address (Give address to which of Box 900	when Plug Back Same Restv. Diff. P.B.T.D. Tubing Depth Depth Casing Shoe
DESIGNATION OF TRANSPORMATION	RTER OF OIL AND or Condense eline Company Casinghead Gas o Unit	or Dry Gas Well Drod. Twp. Rge. Rge. Gas Well Dry Gas Well Drod. Formation Roy Gas Well Dry Gas	AS Address (Give address to which of Box 900 - Dalla Address (Give address to which of Box 900	when Plug Back Same Restv. Diff. P.B.T.D. Tubing Depth Depth Casing Shoe
DESIGNATION OF TRANSPORMATION	RTER OF OIL AND or Condense eline Company Casinghead Gas o Unit	or Dry Gas Well Drod. Twp. Rge. Rge. Gas Well Dry Gas Well Drod. Formation Roy Gas Well Dry Gas	AS Address (Give address to which of Box 900 - Dalla Address (Give address to which of Box 900	when Plug Back Same Restv. Diff. P.B.T.D. Tubing Depth Depth Casing Shoe
DESIGNATION OF TRANSPOIR Name of Authorized Transporter of O Hagnolia Pipe Name of Authorized Transporter of O None If well produces oil or liquids, give location of tanks. If this production is commingled vector to be a completed of the co	RTER OF OIL AND OIL X or Condens eline Company Casinghead Gas o Unit Sec. B 23 with that from any oth tion - (X) Date Compl. Ready Name of Producing TUBIN CASING & T	D NATURAL G. sate or Dry Gas Twp. Rge. 10\$ 32£ ner lease or pool to Prod. Formation NG, CASING, AN	AS Address (Give address to which a Box 900 - Dalla Address (Give address to which a lis gas actually connected? No give commingling order number New Well Workover Deeper Total Depth Top Oil/Gas Pay AD CEMENTING RECORD DEPTH SET	approved copy of this form is to be sense. When Plug Back Same Restv. Diff. P.B.T.D. Tubing Depth Depth Casing Shoe
DESIGNATION OF TRANSPOI Name of Authorized Transporter of O Hagnolia Pipe Name of Authorized Transporter of O None If well produces oil or liquids, qive location of tanks, If this production is commingled vector to be completed to the completed of the comple	RTER OF OIL AND OIL X or Condens eline Company Casinghead Gas o Unit Sec. B 23 with that from any oth tion - (X) Date Compl. Ready Name of Producing TUBIN CASING & T	D NATURAL G. sate or Dry Gas Twp. Rge. 10\$ 32£ her lease or pool to Prod. Formation NG, CASING, AN UBING SIZE	AS Address (Give address to which a Box 900 - Dalla Address (Give address to which a lis gas actually connected? No Ris gas actually connected? No Rive commingling order number New Well Workover Deeper I	approved copy of this form is to be sent When Plug Back Same Restv. Diff. P.B.T.D. Tubing Depth Depth Casing Shoe SACKS CEMENT
DESIGNATION OF TRANSPOIR Name of Authorized Transporter of O Hagnolia Pipe Name of Authorized Transporter of O None If well produces oil or liquids, give location of tanks. If this production is commingled vector to be a completed of the co	RTER OF OIL AND OIL X or Condens eline Company Casinghead Gas o Unit Sec. B 23 with that from any oth tion - (X) Date Compl. Ready Name of Producing TUBIN CASING & T	D NATURAL G. sate or Dry Gas Twp. Rge. 10\$ 32£ her lease or pool to Prod. Formation NG, CASING, AN UBING SIZE	AS Address (Give address to which a Box 900 - Dalla Address (Give address to which a lis gas actually connected? No give commingling order number New Well Workover Deeper Total Depth Top Oil/Gas Pay AD CEMENTING RECORD DEPTH SET	approved copy of this form is to be sent When Plug Back Same Restv. Diff. P.B.T.D. Tubing Depth Depth Casing Shoe SACKS CEMENT
DESIGNATION OF TRANSPOI Name of Authorized Transporter of O Hagnolia Pipe Name of Authorized Transporter of O None If well produces oil or liquids, qive location of tanks, If this production is commingled v COMPLETION DATA Designate Type of Complet Date Spudded Peol Perforations HOLE SIZE TEST DATA AND REQUEST OIL WELL	RTER OF OIL AND OIL X or Condens eline Company Casinghead Gas o Unit Sec. B 23 with that from any oth tion - (X) Date Compl. Ready Name of Producing TUBIN CASING & T	D NATURAL G. sate or Dry Gas Twp. Rge. 10\$ 32£ her lease or pool to Prod. Formation NG, CASING, AN UBING SIZE	AS Address (Give address to which a Box 900 - Dalla Address (Give address to which a lis gas actually connected? No give commingling order number New Well Workover Deeper Total Depth Top Oil/Gas Pay AD CEMENTING RECORD DEPTH SET after recovery of total volume of location and the producing Method (Flow, pump,	approved copy of this form is to be sense. When Plug Back Same Restv. Diff. P.B.T.D. Tubing Depth Depth Casing Shoe SACKS CEMENT ad oil and must be equal to or exceed to gas lift, etc.)
DESIGNATION OF TRANSPOI Name of Authorized Transporter of O Hagnolia Pipe Name of Authorized Transporter of O None If well produces oil or liquids, qive location of tanks, If this production is commingled v COMPLETION DATA Designate Type of Complet Date Spudded Peol Perforations HOLE SIZE TEST DATA AND REQUEST OIL WELL	RTER OF OIL AND OIL X or Condens eline Company Casinghead Gas o Unit Sec. B 23 with that from any oth tion - (X) Date Compl. Ready Name of Producing TUBIN CASING & T	D NATURAL G. sate or Dry Gas Twp. Rge. 10\$ 32£ her lease or pool to Prod. Formation NG, CASING, AN UBING SIZE	AS Address (Give address to which a Box 900 - Dalla Address (Give address to which a lis gas actually connected? No Ris gas actually connected? No Rive commingling order number New Well Workover Deeper I	approved copy of this form is to be sent When Plug Back Same Restv. Diff. P.B.T.D. Tubing Depth Depth Casing Shoe SACKS CEMENT
DESIGNATION OF TRANSPOIR Name of Authorized Transporter of O Hagnolia Pipe Name of Authorized Transporter of O None If well produces oil or liquids, give location of tanks. If this production is commingled vector Data Designate Type of Complet Date Spudded Peol Perforations HOLE SIZE TEST DATA AND REQUEST OIL WELL Date First New Oil Run To Tanks Length of Test	RTER OF OIL AND Oil X or Condens eline Company Casinghead Gas o Unit Sec. B 23 with that from any oth tion - (X) Date Compl. Ready Name of Producing TUBIN CASING & T Date of Test Tubing Pressure	D NATURAL G. sate or Dry Gas Twp. Rge. 10\$ 32£ her lease or pool to Prod. Formation NG, CASING, AN UBING SIZE	Address (Give address to which a Box 900 - Dalla Address (Give address to which a lis gas actually connected? No Sive commingling order number New Well Workover Deeper Total Depth Top Oil/Gas Pay AD CEMENTING RECORD DEPTH SET after recovery of total volume of loadepth or be for full 24 hours) Producing Method (Flow, pump, Casing Pressure	approved copy of this form is to be sense. When Plug Back Same Restv. Diff. P.B.T.D. Tubing Depth Depth Casing Shoe SACKS CEMENT ad oil and must be equal to or exceed to gas lift, etc.) Choke Size
DESIGNATION OF TRANSPORMAME OF Authorized Transporter of ON Hagnolia Pipe Name of Authorized Transporter of Common Name of Authorized Transporter of Complete Office Spudded Part of Complete Spudded Part of Common Name	RTER OF OIL AND or Condens eline Company Casinghead Gas o Unit	D NATURAL G. sate or Dry Gas Twp. Rge. 10\$ 32£ her lease or pool to Prod. Formation NG, CASING, AN UBING SIZE	AS Address (Give address to which a Box 900 - Dalla Address (Give address to which a lis gas actually connected? No give commingling order number New Well Workover Deeper Total Depth Top Oil/Gas Pay AD CEMENTING RECORD DEPTH SET after recovery of total volume of location and the producing Method (Flow, pump,	approved copy of this form is to be sense. When Plug Back Same Restv. Diff. P.B.T.D. Tubing Depth Depth Casing Shoe SACKS CEMENT ad oil and must be equal to or exceed to gas lift, etc.)
DESIGNATION OF TRANSPOIR Name of Authorized Transporter of O Hagnolia Pipe Name of Authorized Transporter of O None If well produces oil or liquids, give location of tanks. If this production is commingled vector Data Designate Type of Complet Date Spudded Peol Perforations HOLE SIZE TEST DATA AND REQUEST OIL WELL Date First New Oil Run To Tanks Length of Test	RTER OF OIL AND Oil X or Condens eline Company Casinghead Gas o Unit Sec. B 23 with that from any oth tion - (X) Date Compl. Ready Name of Producing TUBIN CASING & T Date of Test Tubing Pressure	D NATURAL G. sate or Dry Gas Twp. Rge. 10\$ 32£ her lease or pool to Prod. Formation NG, CASING, AN UBING SIZE	Address (Give address to which a Box 900 - Dalla Address (Give address to which a lis gas actually connected? No Sive commingling order number New Well Workover Deeper Total Depth Top Oil/Gas Pay AD CEMENTING RECORD DEPTH SET after recovery of total volume of loadepth or be for full 24 hours) Producing Method (Flow, pump, Casing Pressure	approved copy of this form is to be sense. When Plug Back Same Restv. Diff. P.B.T.D. Tubing Depth Depth Casing Shoe SACKS CEMENT ad oil and must be equal to or exceed to gas lift, etc.) Choke Size
DESIGNATION OF TRANSPORMAME of Authorized Transporter of ON Hagnolia Pipe Name of Authorized Transporter of Common None If well produces oil or liquids, give location of tanks, If this production is commingled well produced to the complet of Complet Ton Data Designate Type of Complet Date Spudded Peol Perforations HOLE SIZE TEST DATA AND REQUEST OIL WELL Date First New Oil Run To Tanks Length of Test Actual Prod. During Test	RTER OF OIL AND Oil X or Condens eline Company Casinghead Gas o Unit Sec. B 23 with that from any oth tion - (X) Date Compl. Ready Name of Producing TUBIN CASING & T Date of Test Tubing Pressure	D NATURAL G. sate or Dry Gas Twp. Rge. 10\$ 32£ her lease or pool to Prod. Formation NG, CASING, AN UBING SIZE	Address (Give address to which a Box 900 - Dalla Address (Give address to which a lis gas actually connected? No Sive commingling order number New Well Workover Deeper Total Depth Top Oil/Gas Pay AD CEMENTING RECORD DEPTH SET after recovery of total volume of loadepth or be for full 24 hours) Producing Method (Flow, pump, Casing Pressure	approved copy of this form is to be sense. When Plug Back Same Restv. Diff. P.B.T.D. Tubing Depth Depth Casing Shoe SACKS CEMENT ad oil and must be equal to or exceed to gas lift, etc.) Choke Size
DESIGNATION OF TRANSPORMAME OF Authorized Transporter of ON Hagnolia Pipe Name of Authorized Transporter of Common None If well produces oil or liquids, give location of tanks, If this production is commingled well produced to the complet of Complet Ton Data Designate Type of Complet Date Spudded Peol Perforations HOLE SIZE TEST DATA AND REQUEST OIL WELL Date First New Oil Run To Tanks Length of Test Actual Prod. During Test GAS WELL	RTER OF OIL AND OIL AN	D NATURAL G. sate or Dry Gas Twp. Rge. 10\$ 32£ her lease or pool to Prod. Formation NG, CASING, AN UBING SIZE	Address (Give address to which a Box 900 - Dalla Address (Give address to which a lis gas actually connected? No Sive commingling order number New Well Workover Deeper Total Depth Top Oil/Gas Pay AD CEMENTING RECORD DEPTH SET after recovery of total volume of loadepth or be for full 24 hours) Producing Method (Flow, pump, Casing Pressure	approved copy of this form is to be sense. When Plug Back Same Restv. Diff. P.B.T.D. Tubing Depth Depth Casing Shoe SACKS CEMENT ad oil and must be equal to or exceed to gas lift, etc.) Choke Size
DESIGNATION OF TRANSPORMAME of Authorized Transporter of ON Hagnolia Pipe Name of Authorized Transporter of Common None If well produces oil or liquids, give location of tanks, If this production is commingled well produced to the complet of Complet Ton Data Designate Type of Complet Date Spudded Peol Perforations HOLE SIZE TEST DATA AND REQUEST OIL WELL Date First New Oil Run To Tanks Length of Test Actual Prod. During Test	RTER OF OIL AND Oil X or Condens eline Company Casinghead Gas o Unit Sec. B 23 with that from any oth tion - (X) Date Compl. Ready Name of Producing TUBIN CASING & T Date of Test Tubing Pressure	D NATURAL G. sate or Dry Gas Twp. Rge. 10\$ 32£ her lease or pool to Prod. Formation NG, CASING, AN UBING SIZE	As Address (Give address to which a Box 900 - Dalla Address (Give address to which a lis gas actually connected? No give commingling order number New Well Workover Deeper Total Depth Top Oil/Gas Pay AD CEMENTING RECORD DEPTH SET after recovery of total volume of location and the producing Method (Flow, pump, Casing Pressure) Water-Bbls.	approved copy of this form is to be sense. When Plug Back Same Restv. Diff. P.B.T.D. Tubing Depth Depth Casing Shoe SACKS CEMENT ad oil and must be equal to or exceed to gas lift, etc.) Choke Size Gas-MCF
DESIGNATION OF TRANSPOINAME of Authorized Transporter of ON Hagnolia Pipe Name of Authorized Transporter of Common None If well produces oil or liquids, give location of tanks. If this production is commingled well production is commingled well possignate Type of Completed Date Spudded Peol Perforations HOLE SIZE TEST DATA AND REQUEST OIL WELL Date First New Oil Run To Tanks Length of Test Actual Prod. During Test GAS WELL Actual Prod. Test-MCF/D	RTER OF OIL AND OIL W or Condens eline Company Casinghead Gas o Unit Sec. B 23 with that from any oth tion - (X) Date Compl. Ready Name of Producing TUBIN CASING & T FOR ALLOWABLE Date of Test Tubing Pressure Oil-Bbls.	D NATURAL G. sate or Dry Gas Twp. Rge. 10\$ 32£ her lease or pool to Prod. Formation NG, CASING, AN UBING SIZE	As Address (Give address to which a Box 900 - Dalla Address (Give address to which a lis gas actually connected? No give commingling order number New Well Workover Deeper Total Depth Top Oil/Gas Pay AD CEMENTING RECORD DEPTH SET after recovery of total volume of location and the producing Method (Flow, pump, Casing Pressure) Water-Bbls.	approved copy of this form is to be sense. When Plug Back Same Restv. Diff. P.B.T.D. Tubing Depth Depth Casing Shoe SACKS CEMENT ad oil and must be equal to or exceed to gas lift, etc.) Choke Size Gas-MCF
DESIGNATION OF TRANSPORMAME OF Authorized Transporter of ON Hagnolia Pipe Name of Authorized Transporter of Common None If well produces oil or liquids, give location of tanks, If this production is commingled well produced to the complet of Complet Ton Data Designate Type of Complet Date Spudded Peol Perforations HOLE SIZE TEST DATA AND REQUEST OIL WELL Date First New Oil Run To Tanks Length of Test Actual Prod. During Test GAS WELL	RTER OF OIL AND OIL AN	D NATURAL G. sate or Dry Gas Twp. Rge. 10\$ 32£ her lease or pool to Prod. Formation NG, CASING, AN UBING SIZE	Address (Give address to which a Box 900 - Dalla Address (Give address to which a list gas actually connected? No N	approved copy of this form is to be sent When Plug Back Same Res'v. Diff. P.B.T.D. Tubing Depth Depth Casing Shoe SACKS CEMENT ad oil and must be equal to or exceed to gas lift, etc.) Choke Size Gas-MCF Gravity of Condensate

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.

> CDRobertson (Signature)

District Clerk

(Title)

December 30, 1965

(Date

OH CONSERVATION COMMISSION

PPROVED JAMES , 1

BY_____

IT! E

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 allowable on new and recompleted wells.

Fill out Sections I, II, III, and VI only 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.