

DISTRIBUTION	
SANTA FE	<input checked="" type="checkbox"/>
FILE	<input checked="" type="checkbox"/>
U.S.G.S.	<input type="checkbox"/>
LAND OFFICE	<input type="checkbox"/>
TRANSPORTER	<input type="checkbox"/>
OIL	<input checked="" type="checkbox"/>
GAS	<input checked="" type="checkbox"/>
OPERATOR	<input checked="" type="checkbox"/>
PRORATION OFFICE	<input type="checkbox"/>

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-1  
Effective 1-1-65

JUL 20 1987

O. C. D.

ARTESIA, OFFICE

Operator

Harvard Petroleum Corporation

Address

P.O. Box 936, Roswell, NM 88201

Reason(s) for filing (Check proper box)

New Well

☒

Change in Transporter of:

Recompletion

☐

Oil

☐

Dry Gas

☐

Change in Ownership

☐

Casinghead Gas

☐

Condensate

☐

Other (Please explain)

If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
Queso State	3	<del>Undesignated</del> W. Pecos Slope Abo	State, Federal or Fee State	LG-5564
Location				
Unit Letter	J	1980	Feet From The East	Line and 1372
				Feet From The South
Line of Section	34	Township 5S	Range 22E	NMPM, Chaves 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)
				Pacific Atlantic Marketing, Inc.
Name of Authorized Transporter of Casinghead Gas	<input type="checkbox"/>	or Dry Gas	<input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Transwestern Pipeline Co.				P.O. Box 1188, Houston, TX 77251-1188
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Pge.
Is gas actually connected? When				
No 7/21/87				

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	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.				
3-28-87	6-18-87		4456		3500				
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth				
4063 GR	Abo		2971		3205'				
Perforations				Depth Casing Shoe					
2971 - 4266'				4395'					
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
12 1/4"	8 5/8"		860'		520 sx				
7 7/8"	4 1/2"		4395'		650 sx				
		2 3/8"		3205'					

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)

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

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
1544	1 hr	-	-
Testing Method (pilot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size
Back Press.	900	898	.3125

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.

  
(Signature)

Drlg. & Prod. Eng.

(Title)

7-16-87

(Date)

OIL CONSERVATION COMMISSION

APPROVED OCT 6 1987, 19

BY Original Signed By

Mike Williams

TITLE Oil & Gas Inspector

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 deviated 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 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 multiple