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	GAS <input checked="" type="checkbox"/>
OPERATOR	<input checked="" type="checkbox"/>
PRODUCTION OFFICE	

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

RECEIVED BY
MAY 24 1984
O. C. D.
ARTESIA, OFFICE

Operator Dalport Oil Corporation ✓

Address 3471 InterFirst One, Dallas, Texas 75202

Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well <input type="checkbox"/>	Change in Transporter of: <input type="checkbox"/>		
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/>	Dry Gas <input checked="" type="checkbox"/>	
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/>	Condensate <input type="checkbox"/>	

If change of ownership give name and address of previous owner _____

DESCRIPTION OF WELL AND LEASE		Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
Lease Name	<u>Hill-Federal A Com</u>	<u>1</u>	<u>Double L Queen Association</u>	<u>30% Federal 30% 30%</u>	<u>NM-061403</u>
Location		B&C and 114			
Unit Letter	<u>N</u>	<u>660</u>	Feet From The <u>South</u>	Line and <u>1980</u>	Feet From The <u>West</u>
Line of Section	<u>35</u>	Township	<u>14-S</u>	Range	<u>29-E</u>
				NMPM,	Chaves
				County	

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS		Address (Give address to which approved copy of this form is to be sent)	
Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>			
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)	
<u>Cabot Pipeline Corporation</u>		<u>7120 I-40 West, Amarillo, Texas 79106</u>	
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.
			Rge.
			Is gas actually connected? <u>Yes</u>
			When <u>January 17, 1975</u>

If this production is commingled with that from any other lease or pool, give commingling order number: _____

COMPLETION DATA		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res't, L.H. Res't.
Designate Type of Completion - (X)								
Date Spudded	Date Compl. Ready to Prod.	Total Depth		P.B.T.D.				
Elevations (DF, REB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay		Tubing Depth				
Perforations				Depth Casing Shoe				

TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

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		Bbls. Condensate/MMCF		Gravity of Condensate	
Actual Prod. Test-MCF/D	Length of Test				
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size		

I. CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION MAY 25 1984	
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.		APPROVED _____, 19	
<u>W. P. Toland</u> (Signature)		BY <u>Mike Williams</u> OIL AND GAS INSPECTOR	
President (Title)		TITLE _____	
May 21, 1984 (Date)		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 only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.	



TONEY ANAYA
GOVERNOR

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT
OIL CONSERVATION DIVISION
ARTESIA DISTRICT OFFICE

May 14, 1984

P.O. DRAWER DD
ARTESIA, NEW MEXICO 88210
(505) 748-1283

Dalport Oil Corporation
3471 First National Bank Building
Dallas, Texas 75202

Re: Form C-111
Gas Purchaser's Report

Gentlemen:

The Santa Fe Office has called to our attention that your Gas Purchaser is shown as TUCO, but reported each month on Cabot Corporation's C-111.

You will need to file a Form C-104 showing change of transporter for the effected well or wells.

Please send a corrected Form C-104 showing Gas Purchaser, within the next 14 days to avoid the cancellation of your allowable for the effected well or wells.

Very truly yours,

Leslie A. Clements
Leslie A. Clements
Supervisor, District II

LAC:fc