| | DISTRIBUTION 5 ANTA FE | REQUEST | CONSERVATION CO' SION FOR ALLOWABLE AND ANSPORT OIL AND NATURAL RECEIV | Form C-104 Supersedes Old C-104 and C-1 Effective 1-1-65 | |
|------|---|--|---|--|--|
| - | OPERATOR PROBATION OFFICE | | | | |
| I. | Operator HAL M. STIERWALT D. C. | | | | |
| | Address ARTESIA, OFFICE | | | | |
| | P.O. Box 698, Roswell, New Mexico, 88201 Reason(s) for filing (Check proper box) Other (Please explain) | | | | |
| | New Well Recompletion Change in Ownership | Change in Transporter of: Oil Bry G | CHANGE IN W | LOR FEDERAL No. 2 | |
| | If change of ownership give name and address of previous owner | SOUTBERN UNION PRO | DUCTOON CO. , DALL | AS, TEXAS | |
| II. | DESCRIPTION OF WELL ANI | D LEASE | | ` | |
| | Lease Name Southern Union Fed | Well No. Pool Name, Including I WEST HENSHA | | Lease No. 06407A | |
| | | | | | |
| | Unit Letter ; 32 | Peet From The NORTH LI | re and 1900 44 7 Feet From | n The EAST | |
| | Line of Section T | ownship 16-S Range | 60-E , NMPM, EDD | Y County | |
| III. | DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS | | | | |
| | Name of Authorized Transporter of C NAVAJO CRUDE OIL F | or Condensate | Box 175 ARTESIA, | roved copy of this form is to be sent) N. M. 88210 | |
| | Name of Authorized Transporter of Casinghead Gas or Dry Gas CONTINENTAL OIL CO. | | Address (Give address to which approved copy of this form is to be sent) Box 2197, Houston, Texas 77001 | | |
| | If well produces oil or liquids, | Unit Sec. Twp. Rge. | Is gas actually connected? | /hen | |
| | If this production is commingled a | | YES | L961 | |
| IV. | 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'v. Diff, Res'v. | | | | |
| | Designate Type of Complet | | Now well worker Beepen | Find Buck Sume Res-V. Diff, Res-V. | |
| | Date Spudded | Date Compl. Ready to Prod. | Total Depth | P.B.T.D. | |
| | Elevations (DF, RKB, RT, GR, etc.) | Name of Producing Formation | Top Oil/Gas Pay | Tubing Depth | |
| | Perforations Depth Casing Shoe | | | Depth Casing Shoe | |
| | | | | | |
| | HOLE SIZE | TUBING, CASING, AN | D CEMENTING RECORD DEPTH SET | 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 allow able 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 | Cil-Bbis. | Water-Bbls. | Gas-MCF | |
| | | | · · · · · · · · · · · · · · · · · · · | | |
| | GAS WELL | | | | |
| | Actual Prod. Test-MCF/D | Length of Test | Bbls. Condensate/MMCF | Gravity of Condensate | |
| | Testing Method (pitot, back pr.) | Tubing Pressure (Shut-in) | Casing Pressure (Shut-in) | Choke Size | |
| | | | 1 | | |
| VI. | CERTIFICATE OF COMPLIANCE | | OIL CONSERVATION COMMISSION | | |
| | | regulations of the Oil Conservation | BY D. C. Seessett 19 | | |
| | | with and that the information given be best of my knowledge and belief. | | | |
| | | | TITLE GIL AND GAS INSPECTOR | | |
| (| TheleM Stienwalk | | This form is to be filed in compliance with RULE 1104. | | |
| - | (Signature) | | 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 | | |
| | (T.1) | | tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for allow- | | |
| | able or | | able on new and recompleted w | ble on new and recompleted wells. Fill out only Sections I, II, III, and VI for changes of owner, | |
| | (Date) | | well name or number, or transporter, or other such change of condition. | | |

Separate Forms C-104 must be filed for each pool in multiply