

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

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OCT 20 1983

Form C-104
Revised 10-01-78
Format 06-01-83

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

BUREAU OF LAND MANAGEMENT
FARMINGTON RESOURCE AREA

I. Operator
Samuel Gary Oil Producer, Inc.
Address
#4 Inverness Court East Englewood, Colorado 80112
Reason(s) for filing (Check proper box):
☐ New Well
☐ Recompletion
☒ Change in Ownership & Name
Change in Transporter of:
☒ Oil
☐ Casingshead Gas
☐ Dry Gas
☐ Condensate
Other (Please explain):
OIL CON. DIV.
DIST. 3

If change of ownership give name and address of previous owner: Lewis Energy Corporation, 700 Broadway, Suite 1129, Denver, Colorado 80203

II. DESCRIPTION OF WELL AND LEASE

Lease Name San Isidro 15	Well No. 4	Pool Name, including Formation Gallup	Kind of Lease State, Federal or Fee Federal	Lease No. NM 36936
Location Unit Letter D : 660 Feet From The north Line and 990 Feet From The west Line of Section 15 Township 20N Range 3W, NMPM, Sandoval County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Permian Corporation	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1702 Farmington, N.M. 87401				
Name of Authorized Transporter of Casingshead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)				
If well produces oil or liquids, give location of tanks.	Unit D	Sec. 15	Twp. 20N	Rge. 3W	Is gas actually connected? When

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

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.

Ray Hagen
(Signature)

Operations Superintendent
(Title)

October 18, 1983
(Date)

OIL CONSERVATION DIVISION

APPROVED

OCT 24 1983

BY

Original Signed by FRANK T. CHAVEZ

SUPERVISOR DISTRICT # 3

TITLE

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.

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

IV. COMPLETION DATA

[illegible]

V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of lead 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
Testing Method (inst. back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size