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| SANTA FE | | / | |
| FILE | | 1 | |
| U.S.G.S. | | <u> </u> | |
| LAND OFFICE | | <u> </u> | |
| TRANSPORTER | OIL | L. | |
| | G A S | | |
| OPERATOR | | 4 | |
| PRORATION OFFICE | | <u>L'</u> | |

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-104

| SANTA FE / | REQUEST F | FOR ALLOWABLE | Supersedes Old C-104 and C-110 Effective 1-1-65 |
|---|---|--|--|
| FILE / | AUTHORIZATION TO TRA | - AND NSPORT OIL AND NATURAL G | Δς |
| U.S.G.S. | AUTHORIZATION TO TRAI | HOLOKI OLE AND HATOKAE OF | |
| TRANSPORTER OIL | | | |
| GAS / | | | |
| PRORATION OFFICE | | | |
| Cperator Cperator | | | |
| SOUTHLAND RO | YALTY COMPANY | | |
| Address | , Farmington, New Mexico 87 | 7401 | |
| Reason(s) for filing (Check prope | box) | Other (Please explain) | |
| New Well | Change in Transporter of: | | |
| Recompletion | Oil Dry Gas | | CHANGE |
| Change in Ownership | Casinghead Gas Conden | With the second | on and |
| If change give na and address of previous owner | Me Aztec Oil & Gas Company, | P. O. Drawer 570, Farmi | ngton, New Mexico 87401 |
| DESCRIPTION OF WELL A | ND LEASE Well No. Pool Name, Including Fo | Smitten Kind of Lease | Jicarilla Lesse No. |
| Lease Name Arizona Jicarilla | Well No. 1 Post Name, including re | Pictured Cliffs State, Federal | 0 1 0 4 1 4 4 4 4 4 |
| Location | | | |
| Unit Letter P; | 990 Feet From The South Line | e and 990 Feet From T | he East |
| | | 4 West, NMPM, | Rio Arriba County |
| Line of Section 25 | Township 25 North Range | 4 West , No. 104 | NIO ATTIVA |
| DESIGNATION OF TRANSI | PORTER OF OIL AND NATURAL GA | S Address (Give address to which approv | ed copy of this form is to be sent) |
| None of Amborized Transcorter | of Castinghead Gas Tour or Day Gas TX | Address (Give address to which approv | ed copy of this form is to be sent) |
| Gas Company of | | First International Bldg | |
| If well produces oil or liquids, | Unit Sec. Two. Ege. | Is gas actually connected? Whe | r. |
| give location of tanks. | | i alian and a number | |
| If this production is commingle | ed with that from any other lease or pool, | | |
| Designate Type of Comp | detion (X) | New Well Workover Deepen | Plug Back Same Res'v. Diff. Res'v. |
| | Date Compl. Ready to Prod. | Total Depth | P.B.T.D. |
| Date Spudded | | | |
| Elevations (DF, RKB, RT, GR, | Name of Producing Formation | Top Oil/Gas Pay | Tubing Depth |
| | | 1 | Depth Casing Shoe |
| Perforations | | | |
| | | CEMENTING RECORD | T |
| HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT |
| | | | |
| | | | |
| | | 1 | · |
| . TEST DATA AND REQUE | ST FOR ALLOWABLE (Test must be a able for this de | | |
| Oll. WELL Date First New Oil Run To Tan | s Date of Test | Producing Method (Flow, pump, gas li | ft, etc.) |
| | | Casing Pressure | Cholesia |
| Length of Test | Tubing Pressure | RIL | |
| Actual Prod. During Test | . Oli-Bbls. | Water-Bbis. | Gds - MCF |
| Vetani bibai baring | | 133 | <u> </u> |
| | | ₹OIL CO | N OCC. |
| GAS WELL Actual Prod. Test-MCF/D | Length of Test | Bbls, Condensate MMCF C | Gravity of Condensate |
| Asias Pios. 16st-Mol/P | | | |
| Testing Method (pitot, back pr., | Tubing Pressure (Shub-in) | Casing Pressure (Shut-in) | Choke Size |
| CERTIFICATE OF COMPLIANCE | | | |
| JAN 1 2 1978 | | | 978, 19 |
| I hereby certify that the rules and regulations of the Oil Conservation Original Signed by A. R. Kendnick | | | y A. R. Menárick |
| above is true and complete | to the best of my knowledge and belief. | f. BY | |
| | TITLE SUFE | | |
| This form is to be filed in compliance with RULE 110 | | | compliance with RULE 1104. |
| | Simples | 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. | |
| District | (Signature) Production Manager | teats taken on the well in acco | ordance with RULE 111. ust be filled out completely for allow |

(Title)

1-1-78 (Date)

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 fited for each pool in multiply completed wells.