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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-110
Effective 1-1-65

Operator SOUTHERN UNION PRODUCTION COMPANY	
Address P. O. Box 808, FARMINGTON, NEW MEXICO 87401	
Reason(s) for filing (Check proper box) Other (Please explain)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input 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

II. DESCRIPTION OF WELL AND LEASE

Lease Name JICARILLA #1	Well No. Pool Name, including Formation 4 BASIN DAKOTA	Kind of Lease State, Federal or Fee FEDERAL	Lease No. CONTRACT #10
Location			
Unit Letter G	1650 Feet From The NORTH Line and 1700 Feet From The EAST		
Line of Section 9	Township 24 NORTH	Range 5 WEST	County RIO ARriba

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
PLATEAU, INC.	FARMINGTON, NEW MEXICO 87401
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)
EL PASO NATURAL GAS COMPANY	P.O.Box 990, FARMINGTON, NEW MEXICO 87401
If well produces oil or liquids, give location of tanks.	Is gas actually connected? When
G 9 24N 5W	No

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 8/21/70	Date Compl. Ready to Prod. 9/22/70	Total Depth 6925 FT. R.K.B.	P.B.T.D. 6897 FT. R.K.B.					
Elevations (DF, RKB, RT, CR, etc.) 6577 FT. R.K.B.	Name of Producing Formation DAKOTA	Top Oil/Gas Pay 6804 FT. R.K.B.	Tubing Depth 6831 FT. R.K.B.					
Perforations 6804 - 6880 FT. R.K.B.			Depth Casing Shoe 6924 FT. R.K.B.					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
12-1/4"	8-5/8"	306	250					
7-7/8"	5-1/2"	6924	1ST STAGE CEMENTED W/600 CU.FT.CMT.					
STAGE COLLAR SET AT 4864 FT. R.K.B. 2ND STAGE CEMENTED W/375 CU.FT. CMT.			STAGE COLLAR SET AT 3506 FT. R.K.B. 3RD STAGE CEMENTED W/1300 CU.FT. CMT.					
2-1/16" TBG. SET @ 6831 FT.								

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/MCF	Gravity of Condensate
3110	3 HOURS		
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size
BACK PRESSURE	1864 PSI (8 DAYS)	PACMER	3/4"

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.

Original signed by
GILBERT D. NOLAND, JR.

GILBERT D. NOLAND, JR. (Signature)
DRILLING SUPERINTENDENT (Title)

OCTOBER 15, 1970 (Date)

OIL CONSERVATION COMMISSION
OCT 29 1970
APPROVED _____, 19_____
BY **Original Signed by A. R. Kendrick**
TITLE **PETROLEUM ENGINEER DIST. NO. 3**

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.