The second section is a second section of the second section of the second section is a second section of the second section of the second section sec				
NO. OF COPIES RECEIVED				
DISTRIBUTION				
SANTA FE				
FILE				
U.S.G.S.				
LAND OFFICE				
TRANSPORTER	OIL			
	GAS			
OPERATOR				
PRORATION OFFICE				

NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE AND

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

	U.S.G.S. AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS									
	LAND OFFICE									
	TRANSPORTER OIL									
	_ GAS									
	OPERATOR									
ı.	PRORATION OFFICE									
	Operator									
	Southland Royalty Company									
	Address									
P.O. Drawer 570, Farmington, NM 87401										
	Reason(s) for filing (Check proper box)		Other (Please explain)							
	New Well	Change in Transporter of:	🗂							
	Recompletion	Cil Dry Ga Casinghead Gas Conder		.						
	Change in Ownership	Casinghed das Conde	nsate Lease the fro	m som						
If change of ownership give name										
	and address of previous owner									
TE DECORPTION OF WELL AND LEACE										
11.	II. DESCRIPTION OF WELL AND LEASE Lease Name Well No. Pool Name tracing Formation Kind of Lease Lease									
Jicarilla 101 #35 Wildhorse Gallup E at State, Federal or Fee Federal Jic.										
	Location		,							
	Unit Letter E; 16	50 Feet From The North Lin	ne and 915 Feet From 5	The West						
	om Letter,									
	Line of Section 1 Tow	mship 26N Range	4W , _{NMPM} , Rio Ar	riba _{County}						
m.	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA	AS							
	Name of Authorized Transporter of Oll	or Condensate 🛣	Address (Give address to which approx							
	Plateau, Inc.		4775 Schl. Rd., NE, Al							
	Name of Authorized Transporter of Cas	· —	Address (Give address to which approx P.O. Box 1899, Bloomfi							
	Southern Union Ga		Is gas actually connected? Who							
	If well produces oil or liquids,	Unit Sec. Twp. P.ge.		rti						
	give location of tanks.	<u>i i i i i i i i i i i i i i i i i i i </u>	No							
	If this production is commingled wit	h that from any other lease or pool,	give commingling order number:							
IV.	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.						
	Designate Type of Completio		X	1 1						
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	PETD						
	11-20-80	1-5-81	8243'							
	Elevations (DF, RKB, RT, CR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tropin Beril D						
	7062' GR	Gallup	7004'	7540'						
	Perforations			ARth 3:1984						
	Glp: 7004'-7551'									
		TUBING, CASING, AN	D CEMENTING RECORD O	L CON. COM.						
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	DISTANCES CEMENT						
	13-3/4"	10-3/4", 32.75#	214'	135 ex						
	9-7/8"	7-5/8", 26.40#	4086'	390 sx						
	6-3/4"	5-1/2", 15.5#&17.0#	3932'-8242'	410 sx						
		1-1/2", 2.76#	7540	<u> </u>						
V.		OR ALLOWABLE (Test must be a	after recovery of total volume of load oil epth or be for full 24 hours)	and must be equal to or exceed top allow-						
	OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas li	ft, etc.)						
	Date First New Oil Run 10 1 daks	Date of 1eet								
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size						
	Landin of Last									
	Actual Prod. During Test	Oil-Bbis.	Water-Bbis.	Gas - MCF						
	, Acida (100) 2 aant									
		<u> </u>								
	GAS WELL									
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate						
	241 MCF	3 hrs								
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size						
	Back Pressure	460	965							
VI.	CERTIFICATE OF COMPLIAN	CE	13	TION COMMISSION						
			APPROVED MAY 1 1981 . 19							
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.										
			BY OFFICE BY BLOCK T. CHAVEZ							
	above is true and complete to the	de la my monte de la marcha de								
			TITLE SUPERVISOR DISTRICT # 3							
	- 0 V		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.							
	D/4	n Kyan								
	,	ature)								
District Production Manager (Title)			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.							
							(De	ate)	Separate Forms C-104 mus	t be filed for each pool in multiply
						ļI			completed wells.	