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AUG 11 1986

OIL CON. DIV. DIST. 3

Form C-104 Revised 10-01-79 Format 28-01-83 Page 1

STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form with fields: NO OF LOCUS DEVICES, DISTRIBUTION, LAND TYPE, FILE, U.S.G.A., LAND OFFICE, TRANSPORTER (OIL, GAS), OPERATOR, OPERATING OFFICE

Owner: Ladd Petroleum Corporation
Address: 370 17th Street, Suite 1700, Denver, CO 80202

Reasons for filing (Check proper box): New Well, Resumption, Change in Ownership, Change in Transporter of: Oil, Condensate Gas, Dry Gas, Condensate. Other (Please explain):

II. DESCRIPTION OF WELL AND LEASE
Well Name: Lindrith
Well No.: 29E
Pool Name, including Permission: Basin Dakota
Kind of Lease: Federal
Location: Unit Letter K, 1520 Feet From The South Line and 1750 Feet From The West
Line of Section 9, Township 26N, Range 7W, N.M.P.M., Rio Arriba County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
Name of Authorized Transporter of Oil: The Mancos Corporation
Name of Authorized Transporter of Condensate Gas: El Paso Natural Gas Company
Address (Give address to which approved copy of this form is to be sent): P.O. Box 1320, Farmington, NM 87499
P.O. Box 990, Farmington, NM 87499
Is gas actually connected? YES
When: August 1984

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.
Denise R. Lindemanis
Senior Production Clerk
8-5-86

OIL CONSERVATION DIVISION
APPROVED AUG 11 1986
BY [Signature] 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

Designate Type of Completion - (X)		Oil well	Gas well	New well	Workover	Deepen	Plug Back	Some Reentry	Full Reentry
Date Spudded	Date Comp. Ready to Prod.		Total Depth			P.A.T.C.			
Levels (DF, RKB, RT, CR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth			
Perforations					Depth Casing Shoe				

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

V. TEST DATA AND REQUEST FOR ALLOWABLE

(Test must be after recovery of total volume of liquid oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

OIL WELL

Date First New Oil Run To Tanks	Date of Test	Producing Interval (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Case 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
Testing Method (BAGG, back pr.)	Tubing Pressure (SBHP-LB)	Casing Pressure (SBHP-LB)	Case Size