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TRANSPORTER	OIL / GAS /
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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

I. Operator
Austral Oil Company Incorporated
Address
2700 Humble Building, Houston, Texas 77002
Reason(s) for filing (Check proper box) Other (Please explain)
New Well ☐ Change in Transporter of: Oil ☐ Dry Gas ☐ *From TransWestern*
Recompletion ☐ Casinghead Gas ☐ Condensate ☒
Change in Ownership ☐

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Navajo	Well No. 1	Pool Name, including Formation Basin Dakota	Kind of Lease State, Federal or Fee Indian
Location Unit Letter G : 2310 Feet From The North Line and 1650 Feet From The East Line of Section 25 , Township 27-N Range 9-W , NMPM, San Juan County			

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> McWoods Corporation	Address (Give address to which approved copy of this form is to be sent) 2003 Wilco Bldg, Midland, Texas	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 900, Farmington, New Mexico	
If well produces oil or liquids, give location of tanks. Unit G Sec. 25 Twp. 27-N Rge. 9-W	Is gas actually connected? Yes	When 3-26-65

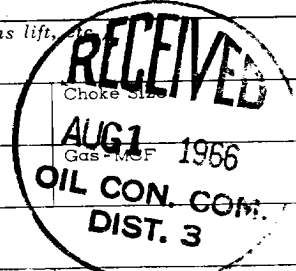
If this production is commingled with that from any other lease or pool, give commingling order number: **SM-246**

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spud'd	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Pool	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 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/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size

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.

Roy Copeland
Drilling and Production Superintendent

(Signature)

(Title)

July 28, 1966

(Date)

OIL CONSERVATION COMMISSION

APPROVED **AUG - 1 1966**, 19
BY **Original Signed by Emery C. Arnold**
SUPERVISOR DIST. #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 Sections I, II, III, and VI only 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.