DISTRIBUTIO) N	i	1	
HTAFE		Ī	Ī	
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G.S.		Ĭ		
NO OFFICE		1		_
ANSPORTER	OIL			
	GAS	Ţ		
ERATOR				
ORATION OF	FICE			

NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE AND

Parm C-104 Supercedes Old C-104 and C-110 Elloctive 1-1-65

NO OFFICE	AUTHORIZATION TO TRAN	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS			
ANSPORTER OIL					
GAS					
ORATION OFFICE					
BHP Petroleum (Ameri	cas), Inc.				
P.O. Box 3230, Caspe	r, WY 82602				
sants) for liling (Check proper box)	Change in Transporter of:	Other (Please explain)			
rampletion	Oil Dry Gas				
inge in Ownershir	Casinghead Gas Condens	ate			
address of previous owner Energy Reserves Group, Inc., P.O. Box 3280, Casper, WY 82602					
SCRIPTION OF WELL AND I	EASE Well No. Pool Name, Including For	mation Kind of Leas	base No.		
Sarah E. Lilly "B"	1 West Kutz PC	State, Federa	Federal NM032325		
Unit Letter A: 9	90 Feet From The North Line	and 990 Feet From	The <u>East</u>		
Line of Section 8 Township 27N Range 12W , NMPM, San Juan County					
SIGNATION OF TRANSPORT	ER OF OIL AND NATURAL GAS	S Aggress (Give address to which appro	ved copy of this form is to be sent;		
me or Authorized Transporter of Cas	ingnead Gas or Dry Gas X	Address (Give address to which appro	ved copy of this form is to be sent!		
El Paso Natural Gas	i	P.O. Box 990, Farmingt			
well produces oil or liquids, re location of tanks.	Unit Sec. Twp. Age.	1s gas actually connected? Wh	7-18-58 .		
nis production is commingled with that from any other lease or pool, give commingling order numbers MPLETION DATA					
Designate Type of Completio	n - (X) Oil Well Gas weil	New Well Workover Deepen	Plug Back Same Resty, Diff. Resty,		
te Spudded	Date Compi. Reday to Prod.	Total Depth	P.3.T.D.		
svations (DF, RK3, RT, GR, etc.,	Name of Producing Formation	Top O4/Gas Pay	Tubing Depth		
riardtions		Depth Casing Shoe			
	TUBING, CASING, AND				
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
		<u> </u>			
IST DATA AND REQUEST FO	OR ALLOWABLE (Test must be of able for this de	ter recovery of total volume of load oil pth or be for full 24 hours)	l and must be equal to or exceed top allow-		
ite First New Cil Run To Tones	Date of Test	Producing Method (Flow, pump, gas l	ift, etc.j		
ingin of Teet	Tubing Pressure	Casing Pressure	1.34 Size		
itual Prod. During Test	OII-Bbis.	Water-Bbls.	de MCF		
-	/		SEP 2 7 1985		
AS WELL OIL CONT ON.					
ctual Prod. Test-MCF/D	Length of Test	Bbls. Concensate/MMCF	Gravity of Sandanadie		
reling Method (pitot, back pr.)	Tubing Pressure (Shmt-in)	Cosing Pressure (Shut-in)	Choke Sixe		
IRTIFICATE OF COMPLIANC	Œ	OIL CONSERV	SEP 27 1985		
ereby certify that the rules and regulations of the Oil Conservation mission have been complied with and that the information given		APPROVED			
ove is true and complete to the	Supervisor District		SOR DISTRICT		
	\supset . \land	This form is to be filed in compliance with RULE 1104.			
Male	Elden	If this is a request for allowable for a newly drilled or despends well this form must be accompanied by a tabulation of the deviation			
District Clerk	(Cura)	tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for allow-			
015c11cc CIETA	10)	able on new and recomplated wells.			
100	(Date) Fill out only Sections I, II, III, and VI to Change of (Date)				
·		Separate Forms C-104 mi completed wells.	ist be filed for each pool in multiply		