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## NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE

Supersedes Old C-104 and C-11 Effective 1-1-65

AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS **OPERATOR** PRORATION OFFICE Operator Energy Reserves Group, Inc. Address P. O. Box 3280, Casper, Wyoming 82601 Reason(s) for filing (Check proper box) Other (Please explain) New Well Change in Transporter of: Recompletion Name change from Clinton Oil Company Dry Gas Change in Ownership Casinghead Gas Condensate If change of ownership give name and address of previous owner DESCRIPTION OF WELL AND LEASE Well No. Pool Name, Including Formation Lease No. H. Pipkin Fulcher Kutz Pictured Cliffs State, Federal or Fee Federal SF078019 Location North Line and\_ Unit Letter\_ Feet From The 990 East Feet From The Line of Section Township 27N 11W Range , NMPM, <u>San Juan</u> County DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Ci. or Condensate Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Casinghead Gas or Dry Gas TX Address (Give address to which approved copy of this form is to be sent) Southern Union Gathering Co. Fidelity Union Tower Bldg, Dallas, Texas Unit Sec. P.ge. Is gas actually connected? If well produces oil or liquids, 9-8-67 this production is commingled with that from any other lease or pool, give commingling order number: COMPLETION DATA Oil Well Gas Well Deepen New Well Workover Plug Back Same Resty. Diff. Resty Designate Type of Completion - (X) Date Spudded Date Compl. Ready to Prod. Total Depth Clevations (DF, RKB, RT, GR, etc.) Name of Producing Formation Top Oil/Gas Pay Tubing Depth Perforations Depth Cosing Shoe **43**11 TUBING, CASING, AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE SACKS CEMENT EST DATA AND REQUEST FOR ALLOWABLE (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; DIL WELL 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-Bble. Water - Bbie. Gas - MCF **FAS WELL** Actual Prod. Tool-MCF/D Length of Test Bbls. Condensate/MMCF Gravity of Condensate Testing Method (pitot, back pr.) Tubing Pressure (Shut-in) Casing Pressure (Shut-in) Choke 51ze OIL CONSERVATION COMMISSION ERTIFICATE OF COMPLIANCE APPROVED MAR 2 9 1976 hereby certify that the rules and regulations of the Oil Conservation ommission have been complied with and that the information given love is true and complete to the best of my knowledge and belief. ORIGINAL SIGNED BY N. E. MAXWELL 19 TITLE PUTROLIUM ENGINEER DIST. NO. 3 Tevenue L. Ruder 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 (Signature) tests taken on the well in accordance with RULE 111. District Clerk All sections of this form must be filled out completely for allow-(Title) able on new and recompleted wells. March 25, 1976 Fill out only Sections I. II. III, and VI for changes of owner, (Date) ell name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply