	<i>(</i>							
	57 (21 A. 1 f) FIG. 1		CORTERNATION COM TEOR ALLOWABLE AND	тмоч	Pain G-4n4 Supersedes O Effective 1-1	Nd C-104 and C-1		
	LAND OFFICE IRAP PORTER OIL GAS	AUTHORIZATION TO TI	RAMSPORT OIL AND I	NATURAL GAS				
ì.	PROBATOR PROBATOR OFFICE Operator				SEIN	م جا ر		
	Southland Royalty Co	mpany		MA	R2010=	<u> </u>		
	P. O. Drawer 570, Fa Reason(s) for filing (Check proper box New Well Recompletion Change in Ownershir	Change in Transporter of:	Other (Please	explain) Oj	ON. DIV	<u>.</u>		
	If change of ownership give name and address of previous owner							
II.	DESCRIPTION OF WELL AND							
	Hanks Location	Well No. Pool Name, Including 13E Basin Dakot		Kind of Lease State, Federal or Fe	* Federal	SF-077874		
	Unit Letter C : 1050	Feet From The North	In• and 1610	Feet From The	West			
	Line of Section 12 Tox	wnship 27N Range	10W , NMPM,	San Juan		County		
:п.	Name of Authorized Transporter of Oil Plateau, Inc. Idage of Authorized Transporter of Cas	or Condensate	Address (Give address to 4775 Indian Sc Address (Give address to	• • • • • • • • • • • • • • • • • • • •				
	Southern Union GAthering Unit Sec. Twp. Ege.		P.O. Box 1899, Bloomfield, New Mexico 87413					
	If well produces cil or liquids, give location of tanks.	:	No	<u> </u>				
īV.	If this production is commingled with that from any other lease or pool, give commingling order number: COMPLETION DATA Coll Well Gas Well New Well Workover Deepen Plug Back Same Resty. Diff. Resty							
	Designate Type of Completion - (X)		X ;	Deepen Plag	Satile Ne	l		
	Date Spuaded	Date Compi. Ready to Prod.	Total Depth	P.B.				
	12-30-83 Elevations (DF, RKB, RT, GR, etc.,	3-4-84 Name of Producing Formation	6645 Top Oil/Gas Pay	Tubir	6597'			
	6063' GL	Dakota	6363'		6517.17	7'		
	Perforations 6363'-6520'			Depth	n Casing Shoo			
	TUBING, CASING, AND CEMENTING RECORD							
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SE		SACKS CE			
	12-1/4" 7-7/8"	8-5/8" 5-1/2"	201.9 6645'		7 cu.ft. 6 cu.ft.	(150 sxs) (1040 sxs)		
	7-776	2-3/8"	6517.1		0 00.10.	(10+0 3×3)		
v.	TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL OIL WELL Out Wiret New Cil Ban To Tanks Date of Test Producing Method (Flow, pump, gas lift, etc.)							
	Dute First New Cil Run To Tanks	Date of Test	Producing Method (Flow	, pump, gas lift, etc.)				
	Length of Test	Tubing Pressure	Casing Pressure	Chok	• Siz•			
	Actual Prod. During Test	Oil-Bhis.	Water - Bbis.	Gas-	MCF			
	GAS WELL				1.0			
	Actual Fred. Teet-MOF/D 998	Length of Test 3 hours	Bbls. Condensate/MMCF	Gravi	ity of Condensate	•		
	Testing Nothed (pitot, back pr.)	Tuning Pressure (Shut-in)	Casing Pressure (Shut-	•	• Size			
	Back Pressure	1325	1330		<u>'4"</u>			
VI.	CERTIFICATE OF COMPLIANC	DE .	Martin OIL C	ONSERVATION	i commissic ∆ 2 1984	N		

I hereby certify that the rules and regulations of the Oil Connervation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

,	,	
Esther	2 June	
	(Signature)	
Secretary		
	(Title)	
3_108/		

APK U & 1304 19 APPROVED_ BY Original Signed by FRANK T. CHAYEZ

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.

I'll out only Sections I. II. 13, 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.