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NEW MEXICO OIL CONSERVATION COMMISSION

FORM C-110 (Rev. 7-60)

SANTA FE, NEW MEXICO EDITIFICATE OF COMPLIANCE AND AUTHORIZATIO

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Basin Dakota If well produces oil or condensate		-V-44				
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Authorized transporter of oil or condensate	If well produces oil or condensate Unit Letter	Section	Township	Range		
Authorized transporter of casine head gas	give location of tanks	11				
Southern Union Gas Company Date Concepted? No.	Authorized transporter of oil or condensate	Address (give ad	dress to which approved copy of	this form is to be sent)		
Southern Union Gas Company Date Commented? Now Mexico						
Authorised transporter of casing head gas _ or day gas _ acted Southern Union Gas Company REASON(5) FOR FILING (please check proper bex) New Well _ Other (explain below) Casing head gas _ Condensate Casing head gas _ Condensate Casing head gas Casing head gas Condensate Casing head gas C	10% New Mexico Tankers	Farmington, New Mexico				
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Remarks Remarks Remarks Remarks Attn: Mr. J. R. Bynum, Fidelity Union Tower Building, Dallas 1, Texas Remarks Rema		Address (give ad	dress to which approved copy of	this form is to be sent)		
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Change in Transporter (check one) Oil	New Well	Change in Own	ership			
Remarks The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with. Executed this the 9th day of January . 19-63. OIL CONSERVATION COMMISSION Approved by Original Signed By A. R. KENDRICK PETROLEUM ENGINEER DIST. NO: 3: Southern Union Production Company Date Address Post Office Box 808						
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NEW MEXICO OIL CONSERVATION COMMISSION Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65 REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS SOUTHERN UNION PRODUCTION COMPANY 808, FRMINGTON, NEW MEXICO 87401 Reason(s) for filing (Other (Please explain) New Well Dry Gas Oil Recompletion Casinghead Gas Condensate Change in Ownership If change of ownership give name and address of previous SF Lease No. II. DESCRIPTION OF WELL AND LEASE ell No. Pool Name, Including Formation Kind of Lease State, Federal or Fee FEDERAL 080724-18 BASIN DAKOTA ZACHRY Location Feet From The NORTH Line and 805 794 _ Feet From The M Unit Letter Township 28 NORTH 10 WESTNMPM. SAN JUAN County 11 Range Line of Section Address (Give address to which approved copy of this form is to be sent) Address (Give address to which approved copy of this form is to be sent)

FIDELITY UNION TOTER

DALLAS TEXAS 75201 ATTN: ROBERT MCCF
1s gas actually connected? Name of Authorized Transporter of Casinghead Gas _____ or Dry Gas XX SOUTHERN UNION CATHERING COMPANY ATTN: ROBERT McCRARY Twp. If well produces oil or liquids, M 11 28N 10W YES MARCH, 1962 give location of tanks. If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Same Restv. Diff. Restv. Oil Well Deepen Plug Back Gas Well New Well Workover Designate Type of Completion - (X) Total Depth P.B.T.D. Date Spudded Date Compl. Ready to Prod. Tubing Depth Name of Producing Formation Top Oil/Gas Pay Elevations (DF, RKB, RT, GR, etc., Depth Casing Shoe Perforations TUBING, CASING, AND CEMENTING RECORD SACKS CEMENT CASING & TUBING SIZE HOLE SIZE (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) V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL Producing Method (Flow, pump, gas lift, etc.) Date First New Oil Run To Tanks Choke Size Casing Pressure Tubing Pressure Length of Test Water - Bbls. Oil-Bbls. Actual Prod. During Test . زوند **GAS WELL** Bbls. Condensate/MMCF Gravity of Condensate Actual Prod. Test-MCF/D Length of Test Casing Pressure (Shut-in) Tubing Pressure (Shut-in) Testing Method (pitot, back pr.) OIL CONSERVATION COMMISSION VI. CERTIFICATE OF COMPLIANCE 1970 7 AUG By Original Staned by Emery C. Arnold 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. SUPERVISOR DIST. #8 ORIGINAL SIGNED BY This form is to be filed in compliance with RULE 1104 B. R. VANDERSLICE If this is a request for allowable for a newly drilled or deep well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111. B. R. VANDERSLIGE (Signature)
AREA SUPERINTENDENT All sections of this form must be filled out completely for allowable on new and recompleted wells. (Title) 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. August 2, 1970 (Date)

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