STATE OF NEW MEXICO RGY AND MINERALS DEPARTMENT

CI ANC INTE			
BO. 67 COPICE SECEIVED			
DISTRIBUTION			
SANTA PE		L	
PILE			Ш
U.S.G.S.			
LAND OFFICE			\Box
TRANSPORTER	OIL		Ш
	GAS	L_	Ш
OPERATOR		<u>L</u>	

OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

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$\overline{+}\overline{+}$	SANTA FE, NEW	MEXICO 87501	
1-1-1			the second secon
	REQUEST FOR	ALLOWABLE	DECIONS82
 	AN		
	AUTHORIZATION TO TRANSP	ORT OIL AND NATURAL GAS	OIL OUR COM
Keues and	Margaret N. Kryes Tr.	Trust Agreement dtd.	
•			
Cheef proper box)	87410	Other (Please explain)	
	Change in Transporter of:		
	OII Dry Gas	75 1	
፟	Casinghead Gas Condens	sale []	
hip give name B	Rodley H. Keyes - Bux	842 - Uztec, 47. m. 87	410
F WELL AND L	EASE	emation Kind of Lease	Lease No.
	Well No. Pool Name, including i	or For Federal	
FEDERAL	#1 PINON-FRUIT	KANU State, Foresta	, reading
D : 11°	90 Feet From The N Line	and 1040 Feet From 1	The W
17 Tow	nship 28 N Range	IW , NMPM,	SAN JUAN County
ANCRORT	ER OF OIL AND NATURAL GA	s	
Trensporter of Oil	or Condensate	Address (Give address to which approx	ved copy of this form is to be sent)
			- I am a talia ta mana ha a mana ha
Transporter of Cas	inghead Gas Or Dry Gas	Address (Give address to which approx	The Other
VATURAL G	AS COMPANY	Box 842 - Agtec, N	
or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected to	
	h that from any other lease or pool,	give commingling order number:	7
ATA		New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.
pe of Completion	n - (X)	New well wellster Seeben	
pe of Completio		Total Depth	P.B.T.D.
	Date Compl. Ready to Prod.		
B, RT, GR, etc.	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
B, KI, GR, WIC.			
			Depth Casing Shoe
		COURTING DECARR	
		DEPTH SET	SACKS CEMENT
SIZE	CASING & TUBING SIZE	DEFIN VET	
	1		<u>i</u>
D REQUEST FO	OR ALLOWABLE (Test must be a able for this de	pth or be for full 24 hours/	and must be equal to or exceed top dilor
Run To Tanks	Date of Teet	Producing Method (Flow, pump, gas l	ifi, etc.)
		Co-to- Personne	Cheke Size
	Tubing Pressure	Casing Pressure	
		Maria Bhia	Gas - MCF

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 only Sections I. H. III, 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.

Form C-104 Revised 10-1-78

Box 842 - Mater NIV	87410 Other (Please explain)				
Reason(s) for filing (Cheef proper box)	Change in Transporter of:				
New Well Recompletion	OII Dry Gas				
Change in Ownership	Casinghead Gas Condens	ate			
NAME OF TAXABLE PARTY OF TAXABLE PARTY.	Da 11 11 12 P	sun Atain m St	+ d16		
if change of ownership give name and address of previous owner	Brodley H. Keyes - Bux	1 142 - CH310C, 71.11. 0	1410		
DESCRIPTION OF WELL AND I	Well No. Pool Name, Including Fo	rmation Kind of Lea	Lease No.		
LUCERNE FEDERAL	#1 PINON - FRUITLAND State, Federal or Fee Federal				
Location	00 01	and 1040 Feet From	The W		
Unit Letter::1		•	1		
Line of Section Tow	mship 23N Range	(NMPM,	JAN JUAN COUNTY		
DESIGNATION OF TRANSPORT	OF CONDENSES CONTRACTOR	S Address (Give address to which appr	oved copy of this form is to be sent)		
Name of Authorized Transporter of Oil		•			
Name of Authorized Transporter of Cas	inghead Gas 🔼 or Dry Gas 🗌	Address (Give address to which appr	oved copy of this form is to be sent)		
EL PASO NATURAL G	AS COMPANY	Box 842 - Agtec, 1	V.M. 87410		
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge.	is gas actually connected? When			
the state of the commingled will	th that from any other lease or pool,	give commingling order number:	*		
COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.		
Designate Type of Completion					
	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
Date Spudded					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation Top Oil/Gas Pay		Tubing Depth		
Periorations	1		Depth Casing Shoe		
	TUBING, CASING, AND	CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET SACKS CEMENT			
HOLE SILE					
TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a	fter recovery of social volume of load of	il and must be equal to or exceed top dilow		
OII. WELL	able for this de	pth or be for full 24 hours) Producing Method (Flow, pump, gas	lift, etc.)		
Date First New Oil Run To Tanks	Date of 1991				
Length of Test	Tubing Pressure	Casing Pressure	Choke \$120		
	Oil-Bbls.	Water - Bble.	Gas - MCF		
Actual Prod. During Test	54				
GAS WELL	Li seeth of Test	Bbls. Condensate/MMCF	Gravity of Cendensate		
Actual Prod. Test-MCF/D	Length of Test				
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	nsing Pressure (Shut-im) Choke Size		
		OII CONSERV	ATION DIVISION		
CERTIFICATE OF COMPLIAN	CE				
	and the Oil Conservation	APPROVED OF LO	1 0 1982		
I hereby certify that the rules and Division have been complied with	regulations of the Oil Conservation h and that the information given	Uriginal Signed	by CHARLES SHOULDIN		
above is true and complete to th	e best of my knowledge and belief.	BY			

Owner (Title)

12 8 82