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DISTRIBUTION			
SANTA FE			
FILE			
U.S.G.S.		1	
LAND OFFICE			
TRANSPORTER	OIL		L
	G A S		
OPERATOR		<u> </u>	
PROPATION OFFICE		1	

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-104

DISTRIBUTION	NEW MEXICO OIL CON	SERVATION COMMISSION	Supersedes Old C-104 and C-110
SANTA FE		OR ALLOWABLE AND	Effective 1-1-65
FILE	TPANS TO TRANS	SPORT OIL AND NATURAL GA	S
U.S.G.S.	AUTHURIZATION TO TRAIN	7 OK 1 O/2 / A 14	
LAND OFFICE			
I RANSPORTER GAS			
OPERATOR			
PRORATION OFFICE			
Operator			
PetroCorp			77060
Address	um, 16800 Greenspoint Par	k Drive, Houston, Texas	77060
Recoon(s) for filing (Check proper box)	un; 10000	Other (Please explain)	1 . 1 6 . 1
New Weil	Change in Fransporter of:	□ Effective de	ite 4-1-81
Recompletion	Oil Dry Gas	[]	
Change in OwnershipX	Casinghead Gas Condensa	ite [_]	
	W. M. Gallaway, 3005 Nort	while Dr. Suite I. Fa	armington, N.M. 87401
If change of ownership give name and address of previous owner	W. M. Gallaway, 3005 Nort	nridge br., baree 2,	,
			Lease No.
. DESCRIPTION OF WELL AND I	Well No. Pool Name, Including Form	mation Kind of Lease	1
Lease Name	3 Kutz Pictured C	liffs (West) State, Federal	or Fee Federal 0468126
G. H. Callow			South
Location T . 99	O Feet From The East Line	and 1650 Feet From T	he
Unit Letter I : 99		re 2	n Juan County
Line of Section 28 Tow	waship 29 North Range 13	West , NMPM, Bai	
L			
DESIGNATION OF TRANSPORT	OF OIL AND NATURAL GAS	Address (Give address to which approv	ed copy of this form is to be sent)
Name of Authorized Transporter of Oil			;
ł		Address (Give address to which approv	ed copy of this form is to be sent)
Name of Authorized Transporter of Cas	Singhed ode [P. O. Box 1492, E1 Pas	o, Texas /99/8
El Paso Natural Gas Co	Unit Sec. Twp. P.ge.	Is gas actually connected? Whe	n
If well produces oil or liquids,	Unit Sec.	Yes	1954
give location of tanks.	1 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	ive commingling order number:	
If this production is commingled wi	th that from any other lease or pool, g		Plug Back Same Res'v. Diff. Res'v.
V. COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	
Designate Type of Completion	on – (X)	Total Depth	P.B.T.D.
Date Spudded	Date Compl. Ready to Prod.	Total Depth	
		Top Oil/Gas Pay	Tubing Depth
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		
			Depth Casing Shoe
Perforations			
	TUBING, CASING, AND	CEMENTING RECORD	SACKS CEMENT
	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
HOLE SIZE	Chame		
		l l - of land oil	and must be equal to or exceed top allow
V. TEST DATA AND REQUEST F	FOR ALLOWABLE (Test must be after this det	DID OF DE 10/ Just AT DECEN	
AIT WELL.	Date of Test	Producing Method (Flow, pump, gas in	ift, etc.)
Date First New Oil Run To Tanks	Date of Test	(D) 5 (P) 5 (P)	Choke Size
	Tubing Pressure	Cosing Pressure	Cities of the
Length of Test		Water-Bble. MAR 3 0 19	Organ MCF
Actual Fred, During Test	Oil-Bhis.	Water-Bbls. WAR 5 U 15	3/ ³
Actual Prod. During 1991		L Oil C	* 113.7
		Pt 291 G	
GASTELL		PELS. Condensate/ASMOF	Gravity of Condensate
Actual Frod. Test-MOF/D	Length of Test	Z.B. Constitution and	
	1 - 1 - 1 - 1 - 1	Cosing Pressure (Shut-in)	Cheke Size
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)		<u> </u>
		OIL CONSERV	ATION COMMISSION
VI. CANTIFICATE OF COMPLIA	NCE		MAR 0.1987
	out Conservation	APPROVED	- THE POST
I have by certify that the rules and	I thinky certify that the rules and regulations of the Oil Conservation The mission have been complied with and that the information given The is true and complete to the best of my knowledge and belief. Supervisor DISTRICT		rank I have
The list on have been complied to the large is true and complete to the			SUPERVISOR DISTRICT # 8
\$4		TITLE	
PETROCORP		This form is to be filed in	compliance with RULE 1104.
/ - ,	./`	reasing to a request for alle	owable for a newly drilled or diag

If this is a request for allowable for a newly drilled or dec, well, this form must be accompanied by a tabulation of the devices taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for show able on new and recompleted wells. Fill out only Sections I. II. III, and VI for changes of condition well name or number, or transporter, or other such change of condition

Separate Forms C-104 must be filed for each prol in multiple and the