

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

NAME OF WELL	1
DISTRICT	
COUNTY	1
WELL	1
SECTION	
LAND OFFICE	
TRANSPORTER	1
OPERATOR	1
PRODUCTION OFFICE	
Operator	

Monrovia Oil Company	
Address	
P. O. Box 1714, Durango, Colorado 81301	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well ☒	Change in Transporter of:
Recompletion ☐	Oil ☐ Dry Gas ☐
Change in Ownership ☐	Casinghead Gas ☐ Condensate ☐
Effective first delivery	

If change of ownership give name
and address of previous owner

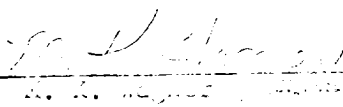
II. DESCRIPTION OF WELL AND LEASE								
Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.				
Florance	93	Blanco Pictured Cliffs	State, Federal or Fee	Fed 87 077833				
Location								
Unit Letter	C	1190 Feet From The	North Line and	790 Feet From The				
Line of Section	10	Township	30N	Range	9W	NMPM,	San Juan	County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS						
Name of Authorized Transporter of Oil ☐ or Condensate ☐	Address (Give address to which approved copy of this form is to be sent)					
None						
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒	Address (Give address to which approved copy of this form is to be sent)					
El Paso Natural Gas Company	P. O. Box 990, Farmington, New Mexico					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA								
Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		X	X					
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
10/14/66	7/12/67		2920		2860			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
6190 Gr.	Blanco Pictured Cliffs		2802		---			
Perforations					Depth Casing Shoe			
2802-2801					2916			
TUBING, CASING, AND CEMENTING RECORD								
HOSE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4"	8-5/8"		125		100			
7-7/8"	3-1/2"		2916		180			

V. TEST 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)						
Date First New Oil Run To Tank		Date of Test		Producing Method (Flow, pump, gas lift, etc.)		
Length of Test		Tubing Pressure		Casing Pressure		Choke Size
Actual Prod. During Test		Oil-Bbls.		Water-Bbls.		Gas-MCF
GAS WELL		Length of Test		Bbls. Condensate/MMCF		Gravity of Condensate
Actual Prod. Test-MCF/D		3 hrs				
Testing Method (Flow, shut-in, Back Pr.		Tubing Pressure (Shut-in)		Casing Pressure (Shut-in)		Choke Size
Back Pr.		---		891		3/4"

VI. CERTIFICATE OF COMPLIANCE	
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.	
	
R. R. McHugh (Title)	
January 5, 1968 (Date)	

OIL CONSERVATION COMMISSION	
JAN 8 1968	
APPROVED _____, 10 _____	
BY Original Signed by A. R. Kendrick	
TITLE PETROLEUM ENGINEER DIST. NO. 3	
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 logs from the well in accordance with Rule 1111.	
All sections of this form must be filled out completely for allowable on new and recompleted wells.	
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.	
Separate Forms C-104 must be filed for each pool in multiply completed wells.	