NO. OF COPIES RECEIVED		5	
DISTRIBUTION			
SANTA FE			
FILE		LŽ.	-
U.S.G.S.		Ľ	
LAND OFFICE		L_	<u> </u>
IRANSPORTER	OIL	$\coprod$	
	GAS	1	
OPERATOR		1	
PRORATION OFFICE		L	

DISTRIBUTION	NEW MEXICO OIL CO	ONSERVATION COMMISSION	Form C-104	
SANTA FE	REQUEST F	FOR ALLOWABLE	Supersedes Old C-104 and C-110 Effective 1-1-65	
FILE		AND		
U.S.G.S.	AUTHORIZATION TO TRAI	NSPORT OIL AND NATURAL G	AS	
LAND OFFICE				
CRANCEOURTED OIL				
I RANSPORTER GAS /				
OPERATOR /				
PRORATION OFFICE				
Operator				
Southern Union	Production Company			
Address				
P. 0. Box 808.	Farmington, New Mexico	ਰ <b>7401</b>		
Reason(s) for filing (Check proper box)		Other (Please explain)		
	Change in Transporter of:	Change of Author	ized Transporter of	
New We!1	Oil Dry Gas		•	
Recompletion	<b>—</b> —			
Change in Ownership	Casinghead Gas Conden			
If change of ownership give name				
and address of previous owner			····	
DESCRIPTION OF WELL AND I	Well No. Pool Name, Including Fo	ormation   Kind of Lease	Lease No.	
Lease Name	well No. Pool Name, mercaing	State Federal	- F	
Lester	1 Blanco Mesar	verde	Fee Fee	
Location			en d	
Unit Letter H : 1670	Feet From The North Lin	ne and 1010 Feet From 1	The <u>East</u>	
J. 2011.				
Line of Section 3 Tow	mship 30 North Range	11 West , NMPM, Sa	n Juan County	
DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA	AS		
Name of Authorized Transporter of Oil	or Condensate	Address (Give address to which appro-	ved copy of this form is to be sent)	
		Farmington, New Mexic	o 87401	
Plateau, Inc. Name of Authorized Transporter of Cas	Inghead Gas or Dry Gas X	1507 Fide lity's Union Tow	ved copy of this form is to be sent)	
		Dollar Torres 75201 A	ttn: Robert McCrary	
Southern Union Gatheri	Unit Sec. Twp. P.ge.	Dallas, Texas 75201, A	en	
If well produces oil or liquids,	Cinit	No		
give location of tanks.	H 3 30N 11W			
If this production is commingled wit	th that from any other lease or pool,	give commingling order number:		
. COMPLETION DATA		New Well Workover Deepen	Plug Back   Same Res'v. Diff. Res'v.	
		1		
Designate Type of Completic		XX	P.B.T.D.	
Date Spudded	Date Compl. Ready to Prod.	Total Depth	4706 Ft. R.KE.	
12-13-74	1-20-75	4760 Ft. R.K.B.		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
5760 Ft. R.K.B.	Mesaverde	4573 Ft. R.K.B.	4507 Ft. R.K.B.	
Perforations			Depth Casing Shoe	
4573 - 4660 Ft. R.K.	В•		4760 Ft. R.K.B.	
4,77	TUBING, CASING, AN	D CEMENTING RECORD		
	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
HOLE SIZE	8-5/8"	300 Ft. R.K.B.	185 Sacks	
12-1/4"	5=1/2"	4760 Ft. R.K.B.	Stage Collar set at	
<b>7-</b> 7/8#	5-1/2"	15 sacks. 2nd stage cen	ented w/400 sacks	
2504 Ft.	1st stage cemented 11/2	TO SACKS. ZHU STAGE CEN	Maria Maria	
	1-1/2" E.U.E.	4507 Ft.	land must be equal to or exceed top allow	
. TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be	after recovery of total volume of load oil lepth or be for full 24 hours)	and must be equal to or extreme top the	
OIL WELL		Producing Method (Flow, pump, gas l		
Date First New Oil Run To Tanks	Date of Test	Producting Manner (c. sear, f. s. s. s.	TO THE STATE OF TH	
		Casing Pressure	Choke Size	
Length of Test	Tubing Pressure	Edging Freshare		
		7)	Gas-MCE	
Actual Prod. During Test	Oil-Bbls.	Water - Bbls.		
		<u> </u>	1	
			all all	
GAS WELL				
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
2492	3 hours			
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
Back Pressure	910	Packer	3/4"	
			ATION COMMISSION	
I. CERTIFICATE OF COMPLIAN	(CE			
		APPROVED	MAY, 19 1975	
I hereby certify that the rules and	regulations of the Oil Conservation	n		
I hereby certify that the rules and regularity that the information given Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		BY Original Signed by Emery C Arnoid		
		SUPER	SUPERVISOR DIST. #3	
		TITLE		
Original signed by		This form is to be filed in	compliance with RULE 1104.	
Kenneth E. Reddy			for a manuful drilled or deepen	
	nature)			
Kenneth L. MOGOV	•	il same taken on the Well in acc	Ordelice with Note	
	tion Technician	All sections of this form	must be filled out completely for allowells.	
(Title)		able on new and recompleted	ver IT for changes of OWR	
April 30, 1975		Fill out only Sections I,	II, III, and VI for changes of owner orter, or other such change of condition	
(1	Date)	Separate Forms C-104 m	ust be filed for each pool in multig	
		completed wells.		
		in the second se		