

DISTRIBUTION	
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FILE	/
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL / GAS /
OPERATOR	/
PRORATION OFFICE	

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

Operator Southern Union Production Company	
Address P. O. Box 808, Farmington, New Mexico 87401	
Reason(s) for filing (Check proper box)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name Hunsaker	Well No. 2-A	Pool Name, including Formation Blanco Mesaverde	Kind of Lease State, Federal or Fee Federal	SF Lease No. 078506
Location				
Unit Letter P	972	Feet From The South	Line and 1012	Feet From The East
Line of Section 26	Township 31 North	Range 9 West	NMPM, San Juan	County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Plateau, Inc.	Farmington, New Mexico 87401					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Southern Union Gathering Company	1507 Fidelity Union Tower Bldg. Dallas, Texas 75201 Attn: Robert McCrary					
If well produces oil or liquids, give location of tanks.	Unit P	Sec. 26	Twp. 31N	R. 9W	Is the naturally connected? No	When

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

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Resrv.	Diff. Resrv.
		XX	XX					
Date Spudded 4/24/75	Date Compl. Ready to Prod. 6/8/75	Total Depth 5320 Ft. R.K.B.			P.B.T.D. 5261 ft. R.K..B.			
Elevations (DF, RKB, RT, GR, etc.) 6017 Gr.	Name of Producing Formation Mesaverde	Top Oil/Gas Pay 4656 Ft. R.K..B.			Tubing Depth 4585 ft. R.K.B.			
Perforations 4656 - 5178 ft. R.K.B.					Depth Casing Shoe 5318 ft. R.K.B.			

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
13-3/4"	10-3/4", 30.0#	231 Ft. R.K.B.	150
9-7/8"	7", 23.0#	3039 ft. R..K.B.	437
6-1/4"	4-1/2", 10.5#	Top: 2980, Btm. 5318 ft.	370

TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (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 Tanks	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

Actual Prod. Test-MCF/D 1314	Length of Test 3 Hours	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.) Back Pressure	Tubing Pressure (shut-in) 488	Casing Pressure (shut-in) 488	Choke Size 3/4"

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.

	
Office Manager	
June 17, 1975	

OIL CONSERVATION COMMISSION

JUN 20 1975

APPROVED _____, 19____
By Original Signed by Emery Q. Arnold
TITLE SUPERVISOR DIST. #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 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, 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 multiple