

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

TO BE COMPLETED BY	
DISTRIBUTION	
LAND & P	
FILE	
U.S.G.A.	
LAND OFFICE	
TRANSPORTER	☐ OIL
	☐ GAS
OPERATOR	
PRODUCTION OFFICE	

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

Form O-104
Revised 10-01-78
Formal 10-01-83
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REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

AUG 11 1986
OIL CON. DIV.
DIST. 3

Owner
Ladd Petroleum Corporation
Address
370 17th Street, Suite 1700, Denver, CO 80202

Reasons for filing (Check proper box)
☐ New Well
☐ Recompletion
☐ Change in Ownership
Change in Transporter of:
☐ Oil
☐ Condensate Gas
☒ Dry Gas
☒ Condensate
Other (Please explain)

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name
Federal "A"
Well No.
3E
Pool Name, including Formation
Basin Dakota
Kind of Lease
State, Federal or Fee
Federal
Lease No.
SF07821
Location
Unit Letter
P
1000 Feet From The
South
Line and
1000 Feet From The
East
Line of Section
26
Township
30N
Range
13W
N.M.P.M.
San Juan
County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil or Condensate
The Mancos Corporation
Address (Give address to which approved copy of this form is to be sent)
P.O. Box 1320, Farmington, NM 87499
Name of Authorized Transporter of Condensate Gas or Dry Gas
Southern Union Gathering Company
Address (Give address to which approved copy of this form is to be sent)
First International Building, Dallas, TX 75720
If well produces oil or liquids, give location of lease.
Unit
P
Sec.
26
Twp.
30N
Rge.
13W
Is gas actually transported?
YES
When
January 1981

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

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.

Denise R. Hindemanes
(Signature)

Senior Production Clerk

8-5-86
(Date)

OIL CONSERVATION DIVISION

AUG 11 1986

APPROVED

BY *Frank J. Davis*

TITLE SUPERVISOR DISTRICT 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 multiply completed wells.

IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil well	Gas well	New well	Workover	Deepen	Plug Back	Same Resrv.	Diff. Resrv.
Date Drilled	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.				
Elevations (DF, RKB, RT, CR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth		Depth Casing Shoe		
Particulars									

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

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 100 allow-
 able for this depth or be for full 24 hours.)*

OIL WELL		GAS WELL	
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	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (Bench, well pt.)	Tubing Pressure (2500-15)	Casing Pressure (2500-15)	Choke Size