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DISTRIBUTION SANTA FE FILE U.S.G.S.	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-114 Effective 1-1-65
TRANSPORTER GAS OPERATOR	AUTHORIZATION TO TRAI	NSPORT OIL AND NATURAL	- GAS
PRORATION OFFICE Decretor			
Southland Royalty	Company		
P.O. Drawer 570,		101 (0)	
Reason(s) for filing (Check proper box) New We!1	Change in Transporter of:	Other (Please explain)	
Recompletion Change in Ownership	Oil Dry Gas Casinghead Gas Condens	声 1	
f change of ownership give name nd address of previous owner			· · · · · · · · · · · · · · · · · · ·
DESCRIPTION OF WELL AND I	Well No. Pool Name, Including Fo	rmation Kind of Le	case Lease No.
Lease Name Grenier "A" Location	#8M Basin Dakota		eral or Fee Federal NM-06738
Unit Letter M ; 110	Feet From The South Line	and 1030 Feet Fro	om The West
Line of Section 35 Tow	mship 30N Range 10W	, _{NМРМ} , San	Juan County
DESIGNATION OF TRANSPORT Name of Authorized Transporter of Oil Plateau, Inc.		Address (Give address to which ap. 4775 Ind. Schl. Rd., 1	proved copy of this form is to be sent) NE, Albuquerque, NM 87110
Name of Authorized Transporter of Cas Southern Union Gat	inghead Gas or Dry Gas X	Address (Give address to which ap P.O. Box 1899, Bloomf	proved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge.	Is gas actually connected?	When
COMPLETION DATA		New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.
Designate Type of Completion		X	P.B.T.D.
Date Spudded 9-26-80	Date Compl. Ready to Prod. 1-27-81	Total Depth 7192	7170'
Elevations (DF, RKB, RT, GR, etc.) 6089 GR	Name of Producing Formation Dakota	Top O:1/Gas Pay 6941	Tubing Depth 7140
Perforations DK: 6941' - 7166'			Depth Casing Shoe 7170 *
DR: 0541 ,100		CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
13-3/4"	10-3/4", 32.75# 7-5/8", 26.40#	228 ' 4565 '	135 sx 517 sx
9-7/8" 6-3/4"	5-1/2", 15.5#	4422'-7170'	265 sx
0-3/4	1-1/2", 2.90#	7140'	
TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be af able for this de	pth or be for full 24 hours)	oil and must be equal to or exceed top allow-
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, ga	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bble.	Water-Bbls.	Common Color
O 40 WELL			The state of the s
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
346 MCF Testing Method (pitot, back pr.)	3 hrs. Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
Back Pressure	1209		3/4"
CERTIFICATE OF COMPLIANCE		OIL CONSER	MAY 11981.
A traing house been complied t	regulations of the Oil Conservation with and that the information given	APPROVED Griginal Signed by ERA	
above is true and complete to the	e best of my knowledge and belief.	11	SUPERVISOR DISTRICT # 3
Ola la		This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or despend	
(Sign	natural Managor	well, this form must be acco	moanied by a labulation of the deviation
•	n Manager	able on new and recompleted	i wells. I. II. III, and VI for changes of owner,
3-10-81		IL Fill out only Sections	2, 41, 144, mile AT 401 primiting of printers

(Date)

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.