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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

I. Operator
Lakeland Petroleum Corporation
Address
P. O. Box 3313, Durango, Colorado
Reason(s) for filing (Check proper box)
New Well ☐ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☒
Other (Please explain)
If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE
Lease Name **Vasaly Federal** Well No. **1** Pool Name, Including Formation **Blanco Mesa Verde** Kind of Lease **Fee & Fed.**
Location
Unit Letter **F** ; **1600** Feet From The **North** Line and **1650** Feet From The **West**
Line of Section **31** , Township **32 North** Range **11 West** , NMPM, **Elev. 6443 DF; San Juan** County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
Name of Authorized Transporter of Oil ☐ or Condensate ☒
New Mexico Tankers, Inc. Address (Give address to which approved copy of this form is to be sent)
P. O. Box 2151, Farmington, New Mexico
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐
Southern Union Gathering System Address (Give address to which approved copy of this form is to be sent)
P. O. Box 950, Farmington, New Mexico
If well produces oil or liquids, give location of tanks. Unit **F** Sec. **31** Twp. **32N** Rge. **11W** Is gas actually connected? **Yes** 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.
Date Spudded Date Compl. Ready to Prod. Total Depth P.B.T.D.
Pool Name of Producing Formation Top Oil/Gas Pay Tubing Depth
Perforations Depth Casing Shoe
TUBING, CASING, AND CEMENTING RECORD
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT

V. 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
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Grav. of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size

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.
H. R. Kendrick
OIL CONSERVATION COMMISSION
APPROVED **MAR 29 1965**
Original Signed By **A. R. KENDRICK**
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