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	GAS		
OPERATOR			
PROPATION OFFICE			

## NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

teets taken on the well in accordance with RULE 111.		U.S.G.S.  LAND OFFICE  IRANSPORTER  OIL  GAS  OPERATOR	AUTHORIZATION TO TRA	AND NSPORT OIL AND NATURAL	GAS		
Southland Royalty Company  Marray D. O. Drawer 570, Farmington, New Mexico 87499  Research of this (feet proper 60)  New well  Research of this (feet proper 60)  New Well  Change of previous words  Change of Transport of Dr. Or Change of Dr. Or Dr. Or Change of Dr. Or Change of Dr. Or Dr. Or Change of Dr. Or Dr. Or Dr. Or Change of Dr. Or Dr. Or Dr. Or Dr. Or Change of Dr. Or Dr	ı.						
Record   Or   Drawer 570, Farmington, New Mexico 87499  Record   Or   Illing (clack proper bar)   Change in Transporter off   Change in Consequence off   Change in Change in Consequence off   Change							
Note well   Compared to   Constraints   Co							
Recomparison Change in Commendation  If changes of commendating give name and selectives of greenings ownership give name and selectives of greenings of the property of the p		, , , , , , , , , , , , , , , , , , ,		Other (Please explain)			
Continues in Consensation give names and editions of previous worses.  If changes of sowership give names and editions of previous worses.  In DESCINITION OF VELL AND LEASE.  Letter Rome.  Hubbard 8 Undestignated Fruittland Store, Section Promotion.  Unter John Letter 9 Store 1780 Pear From The North Live and 1690 Feet From The East  Letter Rome.  Date of Section 15 Township 32N nonge 12H North Live and 1690 Feet From The East  Letter Rome.  Descinition 15 Township 32N nonge 12H North Live and 1690 Feet From The East  Letter Rome of Control of Control of Country 12H North Live and 1690 Feet From The East  Solidary Rome of Control of Country 12H North Live and 1690 Feet From The East  Country 12H North Cou			Cil Dry Gas				
Description of PWELL AND LEASE   Description   Descripti			Casinghead Gas Conden	sate XXEffective Augus	t 1, 1984		
Liceas None   Number of   8							
Hubbard  Location  G 1780  Peet From The North Line and Line and Gestion  15 Township 32N mongs  12M MinDM, San Juan  Country  I.DESSINATION OF TRANSPORTER OF OIL AND NATURAL GAS  Notice of Allocated Transporter of Continuence Care  (San Tanger Continuence Care  (San Tanger Care  Activated Transporter Continuence Care  (San Tanger Care  The North Approved copy of Allo form is to be sent)  P. O. Box 9155, Phoenix, Arizona 85068  And San Juan  Country  P. O. Box 9155, Phoenix, Arizona 85068  It was production in comminged with that from any other lessed or pool, give comminging offer number  If this production is comminged with that from any other lessed or pool, give comminging offer number  If this production is comminged with that from any other lessed or pool, give comminging offer number  If this production is comminged with that from any other lessed or pool, give comminging offer number  Towns founded  Done Signate Type of Completion – (X)  Days (San Tanger Care)  Performance Care  Towns and Completion – (X)  Towns Days  Towns Da	I.	DESCRIPTION OF WELL AND L	EASE	Week of Lea			
Location   G					F		
Line of Section   15   Township   32N   Hongs   12N   NAMPM,   San Juan   Country		Location G 1780			East		
Note of Authorized Transporter of CDI		15	32 N	12W San	Juan		
Note of Authorized Transporter of CDI	_	DD01011471011 07 77 77	IEN OF OUT AND MARKINGS	c			
Note of Authorized Temporales of Castaphend Gas of Day Gas Gas Address (Give address to which approved copy of this form is to be sent)  Southern Union Gathering  P. O. Box 1899, Bloomfield, New Mexico 87413  If well produces oil or liquids, quive location of tomas.  If this production is commanged with that from any other lease or pool, give comminging order number:  V. COMPLETION DATA  Designate Type of Completion — (X)  Designate Type of Completion — (X)  Designated Type of Completion — (X)  Name of Producting Formation  Top Cill/Gas Pay  Performance  Flavorations (AF, RAS, RT, GR, etc., and the complete of the	1.	Name of Authorized Transporter of Oil	or Condensate XX	Address (Give address to which appr			
Southern Union Gathering    P. O. Box 1899, Bloomfield, New Mexico 87413   If well produces oil or literade, quel to the form of mans.    If this production is commingled with that from any other lease or pool, give commingling order number:			any	P.O. Box 9156, Phoeni	x, Arizona 85068		
If this production is commingled with that from any other lease or pool, give commingling order number:  V. COMPLETION DATA  Oil well Cas well Cas well New Yell Workover Deepen Plug Book Some Reafy, Diff. Reafy, Date Squaded Designate Type of Completion — (X)  Date Squaded Type of Completion — (X)  Date Squaded Date Campl. Ready to Prod.  Elevations (DF. R.KS. RT. CR. etc., Name of Producting Formation  Top Oil/Gas Pay  Perforations  TUBING, CASING, AND CEMENTING RECORD  MOLE SIZE CASING a TUBING SIZE DEPTH SET SACKS CEMENT  OIL WELL  Date First New Cil Run To Tonaxs  Date of Test  Actual Prod. During Test  Oil - Bbls.  Casing Pressure  Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.  Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.  This form is to be filed in compliance with RULE 1114.  All sections of this form must be eccampanted by a tabulation of the deviation of the dividence of contains on real many to the sub-tain of the dividence of contains on real many to run must be eccampanted by a tabulation of the deviation of commission of the collapse of condition.  Approved the file of the section of the dividence of contains on run must be eccampanted by a tabulation of the deviation of the dividence of contains.  All sections of this form must be eccampanted by a tabulation of the deviation of the dividence of contains.  All sections of this		1		1			
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V. COMPLETION DATA  Designate Type of Completion — (X)  Date Spusded  Date Completion — (X)  Name of Producing Formation  Top Cil/Gas Pay  Tubing Depth  Depth Casing Shoe  TUBING, CASING, AND CEMENTING RECORD  HOLE SIZE  CASING & TUBING SIZE  DEPTH SET  SACKS CEMENT  TUBING Pressure  Casing Pressure  Date Flux New Cil Run To Tanks  Date of Test  Tubing Pressure  Casing Pressure (Short-in)  Casing Pressure		<u> </u>					
Date Squided  Date Compil. Restly to Prod.  Elevations (DF, RRS, RT, CR, etc.,)  Name of Producing Formation  Top Cil/Jos Pay  Tusing Depth  Depth Casing Shoe  TUSING, CASING, AND CEMENTING RECORD  HOLE SIZE  CASING & TUSING SIZE  DEPTH SET  SACKS CEMENT  HOLE SIZE  CASING & TUSING SIZE  DEPTH SET  SACKS CEMENT  Depth Casing Shoe  TUSING PRODUCING SIZE  DEPTH SET  SACKS CEMENT  Depth Casing Shoe  TUSING PRODUCING SIZE  DEPTH SET  SACKS CEMENT  Depth Casing Shoe  TUSING PRODUCING SIZE  DEPTH SET  SACKS CEMENT  Depth Casing Shoe  TUSING PRODUCING SIZE  Casing Pressure  Casing Pressure  Casing Pressure  Casing Pressure  Total Prod. Test  Tusing Pressure (Shut-in)  Casing Pressure (Shut-in)  Considering Size  OLL CONSERVATION COMMISSION  JUL 1.1 1984  THE CASING DEPTH SET  Casing Pressure (Shut-in)  Commission have been compiled with and that the information given above is true and complete to the best of my knowledge and belief.  SECRETARY  SECRETARY  SECRETARY  SECRETARY  This form is to be filed in compliance with RULE 1104.  All sections of this form a newly drilled or despended wells.  Fill out only Sections of the set with RULE 1104.  All sections of this form a newly drilled or despended to new and recompleted wells.  Fill out only Sections of the set with RULE 1104.  All sections of this form a newly drilled or despended by a tabulation of the deviation state of the set set in RULE 1104.  All sections of this form the filled for each pool in multiply well as an or recompleted wells.  Fill out only Sections I, III, and VI for changes of condition.  Senater Forms C-104 must be filled for each pool in multiply well as an or recompleted wells.	٧.	COMPLETION DATA	Oil Well Gas Well		Plug Back   Same Res'v.   Diff. Res'v.		
Elevations (DF, RKB, RT, GR, etc., Name of Producing Formation  Top Oil/Gas Pay  Tuking Depth Cessing Shoe  TUBING, CASING, AND CEMENTING RECORD  HOLE SIZE  CASING a TUBING SIZE  DEPTH SET  SACKS CEMENT  OIL WELL  Date First New Cil Sun To Tonks  Length of Test  Length of Test  Casing Pressure  Actual Pred, During Test  OIL-Bkis.  Gas WELL  Actual Pred, During Test  OIL-CONSERVATION COMMISSION  JUL 1:18  JUL 1:19  September of the Oil Conservation  Signature  Secretary  Title  This form is to be filled in complisance with RULE 1:104.  All sections of this form must be filled for excepted walls.  All sections of this form must be filled for excepted walls.  Fill out only Sections of the adeviation of the deviation		Designate Type of Completion					
Perforations  TUBING, CASING, AND CEMENTING RECORD  HOLE SIZE  CASING A 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 top allowable for this depth or be for full 24 hours)  Producing Method (Flow, pump, gas lift, star)  Set First New Cit Sun To Tanks  Date of Test  Tubing Pressure  Casing Pressure  Casing Pressure  Casing Pressure  Casing Pressure  Water Bbis.  Casing Pressure  Testing Method (pirot, back pr.)  Tubing Pressure(Shat-in)  Casing Pressure(Shat-in)  Casing Pressure(Shat-in)  Casing Pressure(Shat-in)  Casing Pressure(Shat-in)  Casing Pressure(Shat-in)  Casing Pressure(Shat-in)  Choke Size  OIL CONSERVATION COMMISSION  APPROVED  JUL 11 1984  This form is to be filed in compliance with RULE 1104.  If this is a require for allowable for a newly drilled or deepened will, this form must be secompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.  All sections of this form must be filed for each pool in muitply  (Date)		Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
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V. TEST DATA AND REQUEST FOR ALLOWABLE  Test must be after recovery of total volume of load cill and must be equal to or exceed top allowable for list depth or be for full 24 hours)  Out of list New Cil Run To Tanks  Date of Test  Length of Test  Tubing Pressure  Casing Pressure  Casing Pressure  Casing Pressure  Gas WELL  Actual Prod. During Test  Oil-Bbla.  Water-Bbla.  Water-Bbla.  Gas-MCF  Testing Method (pitot, back pr.)  Tubing Pressure (Shut-in)  Cosing Pressure (Shut-in)  Choke Size  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.  Secretary  Title  This form is to be filed in compliance with Rule 11104.  All sections of the grow such processor of the deviation tests taken on the wall in accordance with Rule 1104.  All sections of the grow must be filled out completely for allowable on new and recompliated wills.  Fill out only secondaries with Rule 1104.  All sections of the filed out completely for allowable on new and recompleted wells.  Fill out only secondaries with Rule 1104.  All sections of the filed out completely for allowable on new and recompleted wells.  Fill out only secondaries of the deviation tests taken on the wall in accordance with Rule 1104.  All sections of conditions.  Fill out only secondaries of the filed out completely for allowable on new and recompleted wells.  Fill out only secondaries of the filed out completely for allowable on new and recompleted wills.  Fill out only secondaries of the filed out completely for allowable on new and recompletely for filed out only secondaries.	Perforations			Depth Casing Shoe			
V. TEST DATA AND REQUEST FOR ALLOWABLE  OIL WELL  One First New Cil Run To Tanks  Date of Test  Length of Test  Tubing Pressure  Cosing Pressure  Cosing Pressure  Cosing Pressure  Actual Prod. During Test  Oil-Bbis.  Water-Bbis.  Cosing Pressure  (Shut-in)  Cosing Pressure  Cosing Pressure  Cosing Pressure  (Shut-in)  Cosing Pressure  Cosing Pressure  (Shut-in)  Cosing Pressure  Cosing Pressure  (Shut-in)  Cosing Press					SACKS CEMENT		
able for this depth or be for full 24 hours    Date First New Cil Run To Tanks		HOLE SIZE	CASING & TOBING SIZE				
able for this depth or be for full 24 hours    Date First New Cil Run To Tanks							
able for this depth or be for full 24 hours    Date First New Cil Run To Tanks							
Date of Test    Casing Pressure	V.		OR ALLOWABLE (Test must be a	fter recovery of total volume of load or	il and must be equal to or exceed top allow-		
Actual Prod. During Test  Gas WELL  Actual Prod. Test-MCF/D  Length of Test  Casing Preasure (Shut-in)  Casing Preasure (Shut-in)  Casing Preasure (Shut-in)  Commission have been compiled with and that the information given above is true and complete to the best of my knowledge and belief.  Secretary  This form is to be filled in compliance with RULE 1104.  If this is a request for silowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation forms on new and recompleted wells.  Fill out only Sections I. II. III. and VI for changes of comer, well name or number, or transporten or other such change of condition.  Senarate Forms C-104 must be filled for each pool in multiply					lift, etc.)		
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GAS WELL  Actual Prod. Test-MCF/D  Length of Test  Testing Method (pitot, back pr.)  Tubing Pressure (Shut-in)  Casing Pressure (Shut-in)  Casing Pressure (Shut-in)  Casing Pressure (Shut-in)  Choke Size  Oil Conservation Commission  APPROVED  JUL 11 1984  APPROVED  Title  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 able on new and recompleted wells.  Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporters or other such change of condition, well name or number, or transporters or other such change of conditions.  Separate Forms C-104 must be filed for each pool in multiply		Length of Tust	Tubing Pressure	OF I			
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Testing Method (pitot, back pr.)  Tubing Pressure (Shut-in)  Casing Pressure (Shut-in)  Casing Pressure (Shut-in)  Choke Size  Oil Conservation Commission  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.  Supervisor District # 3  Title  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 filed 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			Length of Test	Table Gerdenmananas Cal	Gravity of Condensate		
OIL CONSERVATION COMMISSION  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.  APPROVED  SMPERVISOR DISTRICT # 3  TITLE  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, 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			,	Olr op	Chaha Stee		
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