

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AUTHORITY TO PRODUCE OIL AND NATURAL GAS

Form C-104  
Supersedes Old Forms C-100 and C-102  
Effective 1-1-66

NAME	1
ADDRESS	1
LAND OFFICE	
TRANSPORTER	OIL 1 GAS 1
OPERATOR	1
PRODUCTION OFFICE	
Operator	
Location	
Person(s) for filing (Check proper box)	
New Well	
Recompletion	
Change in Ownership	
Change in Production of:	
Oil	
Casinghead 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	Well No. and Name, including Production	Kind of Lease	Lease No.
State	State, Federal or Fee		37-078198
Location			
Unit Letter	900	Feet From The	West
Size of Section	12	Township	3N
Range	1E	NMPM	San Juan
County			

III. LOCATION OF TRANSPORTER OF OIL AND GAS

Name of Authorized Transporter of Oil	Address (Give address to which approved copy of this form is to be sent)					
Platoro Incorporated	Box 100, Farmington, New Mexico					
Name of Authorized Transporter of Casinghead Gas	Address (Give address to which approved copy of this form is to be sent)					
Southern Union Gathering	Box 214, Bloomfield, New Mexico					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Range	Is this actually connected?	When
	9000				115	

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	Test Well	Workover	Deepen	Plug Back	Same Res'ty.	Diff. Res'ty.
Date Spudded	Date Compl. Ready to Prod.	Depth	P.B.T.D.					
5-12-68	5-2-68	475	4937					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Oil/Gas Pay	Tubing Depth					
5022 G	Permian	1752	4904					
Perforations			Depth Casing Shoe					
4752-4785			4975					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
12-1/4"	7-7/8"	106'	75 SX					
7-7/8"	5-7/8"	1635'	50 SX					
4-3/4"	4-1/2"	1075'	40 SX					
	3-1/2"	4904'						

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 allocation for full 24 hours

Length of Test	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 - MCF
CAS MISC	Actual Prod. Test - MCF/D	Length of Test
		Water - Condensate/MCF
		Gravity of Condensate
		Check Sheet

OIL CONSERVATION COMMISSION

NOV 5 1968

Original Signed by Emery C. Arnold

SUPERVISOR DIST. #3

This form is to be filed in compliance with RULE 1100.  
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 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 newly drilled wells.