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FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL GAS
OPERATOR	
PRODUCTION OFFICE	

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-11
Effective 1-1-65

Operator
READ & STEVENS, INC.
Address
P.O. Box 2126, ROSWELL, NM 88201

Reason(s) for filing (Check proper box)	Other
New Well <input checked="" type="checkbox"/>	CASINGHEAD GAS MUST NOT BE PLACED IN THE POOL UNLESS AN ANALYSIS TO D-1076 IS OBTAINED
Recompletion <input type="checkbox"/>	
Change in Ownership <input type="checkbox"/>	
Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	

If change of ownership give name
and address of previous owner

**THIS WELL HAS BEEN PLACED IN THE POOL
DESIGNATED BELOW. IF YOU DO NOT CONCUR
NOTIFY THIS OFFICE.**

II. DESCRIPTION OF WELL AND LEASE

Lease Name Santa Fe	Well No. 4	Pool Name, Including Formation Dickenson San Andres	Kind of Lease XXXXXXX Fee	Lease No. -
Location Unit Letter K 1980 Feet From The South Line and 1980 Feet From The West Line of Section 35 Township 10S Range 36E , NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> UNI Oil, Inc.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 36158, Houston, TX 77036					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) -					
If well produces oil or liquids, give location of tanks.	Unit J	Sec. 35	Twp. 10S	Rge. 36E	Is gas actually connected? -	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 <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v. <input type="checkbox"/>	Diff. Res'v. <input type="checkbox"/>
Date Spudded 11/11/77	Date Compl. Ready to Prod. 1/3/78		Total Depth 5000'		P.B.T.D. --			
Elevations (DF, RKB, RT, GR, etc.) 3989.2' GR-3999' RKB	Name of Producing Formation San Andres		Top Oil/Gas Pay 4960'		Tubing Depth 4994.26'			
Perforations None-Open Hole Completion 4960-5000'					Depth Casing Shoe 4960'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
11'	8 5/8"		348'		225 sx. circ.			
7 7/8"	5 1/2"		4960'		100 sx.			

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 12/22/77	Date of Test 1/3/78	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hrs.	Tubing Pressure -	Casing Pressure -	Choke Size -
Actual Prod. During Test 60	Oil-Bbls. 60	Water-Bbls. 0	Gas-MCF TSTM

GAS WELL

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

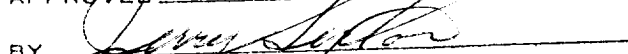

(Signature)

Production Clerk
(Title)

January 12, 1978
(Date)

OIL CONSERVATION COMMISSION

APPROVED **JAN 16 1978**, 19

BY 

TITLE **SUPERVISOR DISTRICT I**

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.

RECEIVED
JAN 13 1978
U.S. CONSERVATION COMMISSION
HOBBS, N. M.