DISTRIBUTION SANTA FE FILE U.S.G.S. LAND OFFICE TRANSPORTER GAS

NEW MEXICO OIL CONSERVATION COMMISSIC - REQUEST FOR ALLOWABLE AND

Form C-104
Supersedes Old C-104 and C-1
Elfective 1-1-65

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

TRANSPORTER GAS	_		
OPERATOR			
Operator) 14 O (1 /	7		
Patter Cil C	arp.		
PO. Wramer		riste Jefas 784	
Reason(s) for filing (Check proper bo	Change in Transporter of:	Patton Cil Ca	rp. purchased from ction Company
Recompletion	Cil Dry Ga	· Sabine Produ	ction Company
Change in Ownership	Casinghead Gas Conden	sare Peffective 11,	7,/79
f change of ownership give name and address of previous owner	Salvine Product	tion Company -	P. A. Bot 3083 Milland Sy 19702
DESCRIPTION OF WELL AND		ormation Kind of Leas	# 1 1 1 1 T T T T
State 5	4 South Bute	ton Mesa SA State, Federa	1 or Fee State K-169
Location 44	1880 \$0 Feet From The South Lin	e and 660 Feet From	The East
Unit Letter :;			
Line of Section 5 T	ownship 9-South Range 33	Coast, NMPM, Le	County
DESIGNATION OF TRANSPO	RTER OF OIL AND NATURAL GA	s <i>f/A</i>	and any of this form is to be sent!
Name of Authorized Transporter of Cit X or Condensate		Address (Give address to which approved copy of this form is to be sent)	
Neme of Authorized Transporter of Gasinghead Gas or Dry Gas		Address (Give address to which appro	
Kene	Unit Sec. Twp. Rge.	Is gas actually connected? Wh	en
If well produces oil or liquids, give location of tanks.	I 5 195 328	No	
f this production is commingled v	vith that from any other lease or pool,	give commingling order number:	Plug Back Same Resty. Diff. Resty.
Designate Type of Complet		1 1	1 1
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Elevations (DF, RKB, RT, GR, etc.,	Name of Producing Formation	Top Oll/Gas Pay	Tubing Depth
Perforations		•	Depth Casing Shoe
	TUDING CACING AND	CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
TEST DATA AND REQUEST : OIL WELL	FOR ALLOWABLE (Test must be a able for this de	fier recovery of socal valume of load ail pit or be for full 24 hours)	and must be equal to or exceed top allow-
Date First New Cil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
			Gae - MCF
Actual Pred. During Test	Cil-Bble.	Water-Bble.	GGE- 1
		<u> </u>	
GAS WELL Actual Prog. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Actual Fibe. 1441-No. /B			
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-ia)	Cosing Pressure (Shut-in)	Choke Size
CERTIFICATE OF COMPLIA	NCE	OIL CONSERVA	ATION COMMISSION
		APPROVED	, 19
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.		<u></u>	g. Signed in J
		100 m 100 m 100 m	
	·- · · ·		
UM. Cooper		This form is to be filed in compliance with MULE 1104. If this is a request for allowable for a newly drilled or despend well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with MULE 111.	
(Signature)			
M. Presi. (Tule)		All sections of this form must be filled out completely for allowable on new and recompleted wells.	
11-30-79		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.	
(Date)		Severate Forms C-104 mus	t be filed for each pool in multiply

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RECEIVED