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SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
	OIL		
TRANSPORTER	GAS		
OPERATOR			
		I	l

NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE

Form C-104 Supersedes Old C-104 and C-110

	SANTA FE		· ·	OR ALLOWABLE	Effective 1-1-65	
	FILE			AND	c	
	U.S.G.S.		AUTHORIZATION TO TRANS	SPORT OIL AND NATURAL GA		
-	LAND OFFICE	\vdash				
- 1	TRANSPORTER GAS	-				
-	OPERATOR	\vdash				
.	PRORATION OFFICE	$\dagger \Box$				
1.	Operator					
-	Bristol Resource	ces	Corporation			
	Address 3601 F 51st.	Suit	e B, Tulsa, OK 74135		İ	
				Other (Please explain)		
Reason(s) for filing (Lineak proper tox)						
	New Well Recompletion		Oil Dry Gas			
	Change in Ownership X		Casinghead Gas Condense	ate		
Ĺ						
I	f change of ownership give na and address of previous owner	me U	nion Pacific Resources Co	ompany, 1000 Louisiana,	<u>Suite 3000, Houston, TX.</u> 77002	
11.	DESCRIPTION OF WELL A	ND I	Well No. Pool Name, Including For	mation Kind of Lease	Lease No.	
	Lauck Federal		13 Chaveroo (Sa	C Enderel	or Fee Federal 29-554778	
	Unit Letter N : 660 Feet From The South Line and 1980 Feet From The West					
	29	т	viship 7-S Range 3	3-E , NMPM, ROO	sevelt County	
i	Line of Section	100	wantp			
111.	DESIGNATION OF TRANS Name of Authorized Transporter	PORT	TER OF OIL AND NATURAL GAS or Condensate	Address (Give address to which approv	ed copy of this form is to be sent)	
	Mobil Pipeline			Address (Give address to which approv	ed copy of this form is to be sent)	
	Name of Authorized Transporter					
	Cities Service Com	ipan)		Box 300, Tulsa, Oklahi	Ullid 74102	
	If well produces oil or liquids,		Unit , Sec.	Yes	6-15-66	
	give location of tanks.		1			
	If this production is commingl	ed wi	th that from any other lease or pool, g	give comminging order number.		
IV.	COMPLETION DATA		Oil waii	New Well Workover Deepen	Plug Back Same Resty. Diff. Resty.	
	Designate Type of Com	pletic		1	D.B.T.D.	
	Date Spudded		Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
				Top Oil/Gas Pay	Tubing Depth	
	Elevations (DF, RKB, RT, GR,	etc.,	Name of Producing Formation	100 011, 043 1 47		
					Depth Casing Shoe	
	Perforations					
			TUBING, CASING, AND	CEMENTING RECORD		
	HOLE SIZE		CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
				tll of lead oil	and must be equal to or exceed top allow	
V.	TEST DATA AND REQUE	EST F	FOR ALLOWABLE (Test must be a) able for this de	oth or be for full 24 nours)		
	OIL WELL Date First New Cil Run To Tar		Date of Test	Producing Method (Flow, pump, gas l	ift, etc.)	
	Date First New Cir Run 10 14					
	Length of Test 9		Tubing Pressure	Casing Pressure	Choke Size	
	Congression				Gas - MCF	
	Actual Prod. During Test		Oil-Bbis.	Water - Bble.		
	GAS WELL		Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
	Actual Prod. Test-MCF/D		Langth of Task			
	Testing Method (pitot, back pr	•.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
	Taking Memor (pass)	•				
	VI. CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION FEB 1 0 1989			
V	I. CERTIFICATE OF COM	. ware	· · · · ·		B I 0 1909	
	I hereby certify that the rul	es and	d regulations of the Oil Conservation	APPROVED		
	I hereby certify that the rules and regulations Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		By Orig. Signed by Paul Kautz			
	above is true and complete	Paul Rauca				
		•				
			<i>^</i> `.		n compliance with RULE 1104. owable for a newly drilled or deepen penied by a tabulation of the deviati	
	Sue De	pl	W	If this is a request for all well, this form must be accom-	panied by a tabulation of the deviati	
	Sue Dipley (Signarire)		II waste taken on the Well ID EC	well, this form must be accompanied by a table of the tests taken on the well in accordance with RULE 111.		
	n L 1	inic	trative Manaver	II All sections of this form t	DUBL DA ITITAG ON' ACUALITA	

(Title) 9/30/88

(Date)

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 conditions.

Separate Forms C-104 must be filed for each pool in multiple completed wells.