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SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR	1		
		† 	_

NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE AND

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

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

	TRANSPORTER OIL GAS						
	OPERATOR						
ı.	PRORATION OFFICE Operator	_					
		mpany forme	rly Souther	m Petroleum	Exploration, Inc.		
	Box 1434, Roswel	1, New Mexi	eo 88201		Same		
	Reason(s) for filing (Check proper	· box)		Other (Plea	ase explain) Ilane change	due to	
	New Well	-	Transporter of:		r with Petroleum E our parent company		
	Recompletion Change in Ownership	Oil Casinghead	Gas Conde	E MI C	ompany"	THE MIGG	
			045	issue []			
	If change of ownership give named and address of previous owner _						
Ι.	DESCRIPTION OF WELL A	ND LEASE					
Ì	Lease Name State J	Well No. P	cool Name, Including F	ormation	Kind of Lease State	k=2671	
	Location				State, Federal or Fee State		
	Unit Letter	660 Feet From	North Lir	660	East		
	25			33-E	Roosevelt		
1	Line of Section	Township	Range	, NMF	РМ,	County	
۱. ا	DESIGNATION OF TRANSPORTER OF	ORTER OF OIL A		AS			
	Name of Authorized Transporter of Oil or Condensate Address (Give address to which approved copy of this form is to be sen Box 900, Dallas, Texas 75221						
	Name of Authorized Transporter of Cities Service O	Casinghead Gas	or Dry Gas	Address (Give addres	s to which approved copy of this form 16, Oklahoma 7400	is to be sent)	
			Twp. P.ge.	ļ	cted? When		
	If well produces oil or liquids, give location of tanks.	G 25	7-s 33-E	Yes	September	1, 1966	
	If this production is commingled	with that from any	other lease or pool,	give commingling ord	ler number: None	•	
•	COMPLETION DATA		Well Gas Well	New Well Workover	Deepen Plug Back Same	Res'v. Diff. Res'v.	
	Designate Type of Compl		<u> </u>		1 1 1		
	Date Spudded	Date Compl. Rea	dy to Prod.	Total Depth	P.B.T.D.		
-	Elevations (DF, RKB, RT, GR, etc.	Name of Producti	ng Formation	Top Oil/Gas Pay	Tubing Depth		
-	Perforations			<u> </u>	Depth Casing Shoe		
	Perforditions						
Į				CEMENTING RECO			
ŀ	HOLE SIZE	CASING &	TUBING SIZE	DEPTH	SET SACKS	CEMENT	
-							
۱ '	TEST DATA AND REQUEST	FOR ALLOWABI	E (Test must be a)	fter recovery of total vo	lume of load oil and must be equal to	or exceed top allow-	
-	OIL WELL Date First New Oil Run To Tanks	Date of Test	able for this de	pth or be for full 24 hou	ow, pump, gas lift, etc.)	<u> </u>	
İ	Date ! Het Hew Off ! Hall ! D ! Clina			, roadonig monios (r	ow, pap, 3 40 10,1, 01017		
	Length of Test	Tubing Pressure		Casing Pressure	Choke Size		
-	Actual Prod. During Test	Oil - Bbls.		Water-Bbls.	Gas - MCF		
	GAS WELL						
٢	Actual Prod. Test-MCF/D	Length of Test	· · · · · · · · · · · · · · · · · · ·	Bbls. Condensate/MM	CF Gravity of Conden	sate	
-	Testing Method (pitot, back pr.)	Tubing Pressure	(shut-in)	Casing Pressure (Shu	t-in) Choke Size		
	t defining inclined (price) oders proy		(0)	000,	0.025 0.25		
. (CERTIFICATE OF COMPLIA	ANCE		OIL	CONSERVATION COMMISS	SION	
	handlin and the shot should not be	ud an milationa of the	Oil Conservation	APPROVED	APIR 2,2 1971)	19	
	hereby certify that the rules are commission have been complied	d with and that the	information given	100	XIIII en		
	above is true and complete to the best of my knowledge and belief.			BY John State of the State of t			
				1 //	PERVISOR DISTRICT		
	se this			This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepened			
-	District Manage(Signature)			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.			
	April 7, 1971 (Title)			Fill out only Sections I. II. III. and VI for changes of owner,			
_		(Date)		well name or numb	er, or transporter, or other such ch	ange of condition.	

Separate Forms C-104 must be filed for each pool in multiply