| BTATE OF NEW MEXICO | | | | | Form C-104 Revised 10-1-78 | |
|---|--|---|--|---|---|--|
| ** ** ***** ****** | OIL CONSERVA | | s , , , , , , , , , , , , , , , , , , , | | | |
| ()18 1 0 (0 111 10)4 | р. о. во: Santa Fe, New | | | | | |
| / 1L Ø | | | | | | |
| U S.U.B. | REQUEST FOR | ALLOWABLE | | | | |
| AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS | | | | | | |
| OPERATION PRUNATION OFFICE | AUTHORIZATION TO TRANSP | | RAL GAS | 20 - 20 - 10 - 10 - 10 - 10 - 10 - 10 - | · • • • • • • • • • • • • • • • • • • • | |
| Chaveroo Operating Com | any, Inc. | | | | | |
| | Services, Inc., P. O. Box | | | | gernangingi ger gerationen Baate ist stigt of the too | |
| Reason(s) Tor liting (Check proper bos | i) Change in Transporter of: | Other (Pleas REEastin | | 109/ | | |
| New Well Recompletion | Oll Dry Got | | ve May 1, | 1904 | | |
| Change in Ownership XX | Castngheod Gas 🚺 Conden | sate [] | H | | | |
| If change of ownership give name | Monument Resources, Inc. | . 5100 N. Brool | dine. Sui | te 700. Oklaho | ma City. | |
| and address of previous owner | | | | Oklahoma | | |
| DESCRIPTION OF WELL AND | LE 35F | ormation | Kind of Lease | | Lease Na. | |
| KMS | ² Chaveroo San A | udres | State, Federal | or Foo State | 0G-1017 | |
| Locution | | | | | | |
| Unit Letter I ; 1 | 980 Feet From The South Line | • and <u>660</u> | Feet From T | he <u>East</u> | | |
| Line of Section 36 T | mahip 75 Range 32 | E , NMPN | , Roosev | elt | County | |
| | | c | | | | |
| DESIGNATION OF TRANSPOR | TER OF OIL AND NATURAL GA | Andress (Give address | to which approv | ed copy of this form is | to be sent) | |
| Mobil Pipe Line Company P. O. Box 900, Dallas, T | | | | exas 75221 | to be sent) | |
| Nane of Authorized Hansperier of California Con La Contra California | | | | | | |
| Cities Service Oil & Ga | Unit Sec. Twp. Rge. | is gas actually connect | | | | |
| If well produces oil or liquids, give location of tanks. | I 36 7S 32E | Yes | | 11/16 | <u>/67</u> | |
| If this production is commingled w. | ith that from any other lease or pool, | give commingling orde | r number: | · · · · · · · · · · · · · · · · · · · | | |
| COMPLETION DATA Designate Type of Completi | Oll Well Gas Well | New Well Workover | Deepen | Plug Back Same Re | sty. Dilf. Resty. | |
| | Date Compl. Ready to Prod. | Total Depth | | P.B.T.D. | | |
| Lote Spudded | | | | | | |
| Liovations (DF, RKB, RT, GR, etc.) | Name of Producing Formation | Top Oil/Gas Pay | | Tubing Depth | | |
| Perforations | | L | | Depth Casing Shoe | | |
| · · | an a | | | | | |
| | TUBING, CASING, AND CASING & TUBING SIZE | CEMENTING RECO | | SACKS CE | MENT | |
| HOLESIZE | | | | | | |
| | | | | | | |
| | | | | · · · · · · · · · · · · · · · · · · · | | |
| TEST DATA AND REQUEST F | OR ALLOWABLE (Test must be of | fer recovery of social vol | ume of load oil (| and must be equal to o | exceed top allow | |
| OIL WELL | able for this de | pth or be for full 24 hour Producing Method (Flo | | (t, etc.) | | |
| Dute First New Oil Run To Tones | | | | | | |
| Length of Teet | Tubing Preseute | Casing Pressure | | Choke Size | • | |
| Actual Prod. During Test | 011-BE10. | Water - Bbls. | | Gas-MCF | | |
| | | <u></u> | | J | | |
| GAS WELL | | | | | | |
| Actual Frod. Teet-MCF/D | Length of Test | Bble. Condensule/MM | :F | Gravity of Condensa | 10 | |
| Teating Method (pitot, back pr.) | Tubing Freeswe (shat-in) | Casing Pressure (Shu | t-in) | Chote Size | | |
| testing weinds (priot, out a priv | | l | | | | |
| CERTIFICATE OF COMPLIANCE | | | CONSERVAT | 1984 | 10 | |
| I hereby certify that the rules and | regulations of the Oil Conservation | APPROVED | | BY JEREY SEXTO | N | |
| Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief. | | BYORIGUME SIGNAL SUPERVISOR | | | | |
| | | TITLE | | | | |
| | | This form is | io to filed in i | compliance with nu | LE 1104. | |
| Won sie Vale | If this is a request for allowable for a newly drilled or deepened | | | | | |
| (5) | If same taken on the well in accomance with north the | | | | | |
| | All eactions of this form must be filled out completely for allow- able on new and recompleted wells. | | | | | |
| 5/ | 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. | | | | | |
| . (1 | Jaie) | Separate For | ns C-104 mus | t be filed for each | port in multiply | |
| | | H compteted wells, | | | | |

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