## DISTRIBUTION SANTA FE II.

(Date)

## EW MEXICO OIL CONSERVATION COMMISSIC REQUEST FOR ALLOWABLE

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

	FILE	7.00001	AND	Effective 1-1-65	
	U.S.G.S.	AUTHORIZATION TO TR		0.4.5	
	LAND OFFICE	AUTHORIZATION TO TRA	ANSPORT OIL AND NATURAL	GAS	
	OIL	1		×	
	TRANSPORTER GAS	1			
	OPERATOR	1			
	PRORATION OFFICE	4			
1.	Operator				
	Silver Monument Minerals, Inc.				
	Address				
	Box 1476, Lovington, New Mexico 88260				
	Reason(s) for filing (Check proper box		Other (Please explain)	<del></del>	
	New We!1	Change in Transporter of:	Omei (1 seuse explain)	:	
	Recompletion	Oil Dry Go	. 🖂	·	
	Change in Ownership X	Casinghead Gas Conde	<b>─</b>		
	Change in Cuncions 13	Casinghead das [ Conden	.sare		
	If change of ownership give name	Wolden Detrolaum Common	otion Dom 1470 Tourism	X H 00000	
	and address of previous owner	Holder Petroleum Corpor	acton, box 1476, 10Ving	ton, New Mexico 88260	
II.	Lease Name	Well No. Pool Name, Including F	ormation   Kind of Leas		
	Humble Tucker	1 Chaveroo-San A	ndres State, Federa	Il or Fee fee	
	Location	_			
	Unit Letter N ; 660	OFeet From TheSLin	se and 1980 Feet From	The W	
	Line of Section 25 To	wnship <b>7 S</b> Range	32 <b>E</b> , NMPM, <b>R</b>	oosevelt County	
III.		TER OF OIL AND NATURAL GA	AS		
	Name of Authorized Transporter of Oil	a cr Condensate	Address (Give address to which appro	oved copy of this form is to be sent)	
	Mobil Pipe Line Company	у	Box 900, Dallas, Texa	S	
	Name of Authorized Transporter of Cas	singhead Gas 🔀 or Dry Gas 🗔	Address (Give address to which approved copy of this form is to be sent)		
	Cities Service Oil Company		Box 300, Tulsa, Oklahoma 74102		
		Unit Sec. Twp. Rge.		nen	
	If well produces oil or liquids, give location of tanks.	N 25 7S 32E	Yes	3-3-68	
			1		
		th that from any other lease or pool,	give commingling order number:		
IV.	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back   Same Resty. Diff. Resty.	
	Designate Type of Completic	on - (X)			
	Data California	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
	Date Spudded			F.B. 1.D.	
		FORMATION SAME AS PREVI		<del>                                     </del>	
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
	Perforations			Depth Casing Shoe	
	TUBING, CASING, AND CEMENTING RECORD				
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
	IN	ORMATION SAME AS PREVIO	USLY REPORTED		
<b>3</b> /	TEST DATA AND PROHEST FO	OP ALLOWARIE (Test must be a	fter recovery of total volume of land all	and must be equal to or exceed top allow-	
	TEST DATA AND REQUEST FOR ALLOWABLE (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 Date of Test Producing Method (Flow, pump, gas lift, etc.)				
	INFORMATION SAME AS PREVIOUSLY REPORTED				
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
	Zeng or			j	
	Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	Gas - MCF	
	Actual Prod. During 1990	On-Baile.			
		<u> </u>		<u> </u>	
	GAS WELL		Bbls. Condensate/MMCF	Gravity of Condensate	
	Actual Prod. Test-MCF/D	Length of Test	Bbis. Condensate/MMCF	Gravity of Condensate	
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
VI.	CERTIFICATE OF COMPLIAN	CE	OIL CONSERVA	ATION COMMISSION	
<b>v</b>	I hereby certify that the rules and regulations of the Oil Conservation		APPROVED JAN 17 1973		
	above is true and complete to the	re is true and complete to the best of my knowledge and belief.		BYDp	
			The Lamey		
	SILVER MONUMENT MINERALS, INC.		TITLE Dispos		
	$\bigcap \alpha I / I I$		This form is to be filed in compliance with RULE 1104.		
	10/11/16/09/00/11/		If this is a request for allowable for a newly drilled or deepened		
-	A C Holder (Signature)		west this form must be accompanied by a tabulation of the deviation		
	A. C. ROIGER		tests taken on the well in accordance with RULE 111.  All sections of this form must be filled out completely for allow-		
	President (Tit	le)	All sections of this form my able on new and recompleted w	ist be filled out completely for allow-	

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.

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