

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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

COUNTY	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL GAS
OPERATOR	
PRORATION OFFICE	

Operator

MONUMENT ENERGY CORPORATION

Address

POST OFFICE BOX 1476, LOVINGTON, NEW MEXICO 88260

Reason(s) for filing (Check proper box)

New Well

☐

Change in Transporter of:

Other (Please explain)

Recompletion

☒

Oil

☐

Dry Gas

☐

Change in Ownership

☐

Casinghead Gas

☐

Condensate

☐

REQUEST FOR 500 BBLS TESTING ALLOWABLE

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name PETROFINA FEDERAL	Well No. 1	Pool Name, including Formation SOUTH PRAIRIE DEVONIAN	Kind of Lease State <u>Federal</u> or Fee	Lease No. 29-02915
Location				
Unit Letter H	1830 Feet From The North Line and 660 Feet From The East			
Line of Section 20	Township 8 South	Range 36 East	NMPM, ROOSEVELT County	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
MOBIL OIL CORPORATION						
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit 20	Sec. 8S	Twp. 36E	Rge. NO	Is gas actually connected?	When

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well X	Gas Well	New Well	Workover	Deepen X	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.) 4112 GR	Name of Producing Formation DEVONIAN		Top Oil/Gas Pay 12867		Tubing Depth			
Perforations 12867 - 12885					Depth Casing Shoe 12,955			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
REPORTS FILED BY J. M. HUBER								
NO CHANGES IN CASING STRING								

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(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 09/23/78	Date of Test 09/23/78	Producing Method (Flow, pump, gas lift, etc.) SWABBING	
Length of Test 3 Hours	Tubing Pressure 0	Casing Pressure 0	Choke Size 2"
Actual Prod. During Test 96	Oil-Bbls. 96	Water-Bbls. 0	Gas-MCF TSTM

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

I 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.

Carroll Deery
(Signature)
PRODUCTION FOREMAN
(Title)
09/28/78
(Date)

OIL CONSERVATION COMMISSION

APPROVED SEP 28 1978
BY John W. Runyan
TITLE Geologist

This form is to be filed in compliance with RULE 1104.
If this is a request for allowable for a newly drilled or deepened 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.
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 multiple