	NO. NO IN MELEVED				
	DISTRIBUTION	NEW MEXICO OIL CO	DISERVATION COMMISSION	Form C+104	
ľ	SANTA FE REQUEST FOR ALLOWABLE		Supersedes Old C-104 and C-110		
[FILE		AND	Effective 1-1-65	
	U.S.G.S.	AUTHORIZATION TO TRAI	NSPORT OIL AND NATURAL GA	S	
	LAND OFFICE				
	IRANSPORTER OIL				
	GAS				
	OPERATOR				
1.	PRORATION OFFICE				
1	WOLFSON OIL COMPANY				
	3206 REPUBLIC NATIONAL BANK TOWER, DALLAS, TEXAS 75201				
	eason(s) for filing (Check proper box) Other (Please explain)				
	New Well	Change in Transporter of:	_		
	Recompletion	Oil XX Dry Gas	s		
	Change in Ownership	Casinghead Gas XX Condens	sate		
		change of ownership give name			
	ad address of previous owner				
п.	DESCRIPTION OF WELL AND I	Well No. Pool Name, Including Fo	rmation Kind of Lease	Lease No.	
	MOUNTAIN FEDERAL			Fee FED. 18846	
	Location				
C 2310 North time and 1980 Feet From The East				eEast	
	Unit Letter <u> </u>				
	Line of Section 30 Tow	nship 7-S Range	32-Е , ММРМ, И	ROOSEVELT County	
Ш.	DESIGNATION OF TRANSPORT	ER OF OIL AND NATURAL GA	S	to an intervention of the second	
	Name of Authorized Transporter of Oil	XX or Condensate	Address (Give address to which approve		
	MATADOR PIPELINE Name of Authorized Transporter of Cas	ES, INC,	BOX 2256, WICHITA, KS Address (Give address to which approve	67201 d copy of this form is to be sent)	
	CITIES SERVICE (BOX 300, TULSA, OK Is gas actually connected? When	/4102	
	If well produces oil or liquids,			out Jan. 15, 1979	
	give location of tanks.	G 30 7-S 32-E		jout Jan. 13, 1979	
		h 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 Res'v. Diff. Res'v.				
	Designate Type of Completio	n - (X) X		1	
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
	6-11-78	7-28-78	4296'	4260'	
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
	4423 RKB	SAN ANDRES	4108'	 Depth Casing Shoe	
	Perforations				
	4108-64	4108-64 4280'			
			DEPTH SET	SACKS CEMENT	
	HOLE SIZE	CASING & TUBING SIZE	1788'	600	
	11	<u>8-5/8</u> 4 ¹ / ₂	4280'	300	
	7-7/8		4150'		
N	TEST DATA AND REQUEST FO	OR ALLOWABLE (Test must be a	fter recovery of total volume of load oil a	nd must be equal to or exceed top allow-	
ν.	EST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top a able for this depth or be for full 24 hours) IL WELL (Figure 2010)				
	Date First New Oil Run To Tanks Date of Test		Producing Method (Flow, pump, gas lift	, etc.j	
				Choke Size	
	Length of Test	Tubing Pressure	Casing Pressure		
			Water - Bbls.	Gas - MCF	
	Actual Prod. During Test	Oll-Bbls.			
		L			
	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
	Actual Prod. Test-MCF/D				
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
				l	
1 /1	CERTIFICATE OF COMPLIANCE			TION COMMISSION	
¥1.	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.		DEC-9	19/8	
			Orig. Signed by		
			Jerry Sexton		
			Jerry Sexton TITLE Dist 1. Supt		
	\bigcirc		This form is to be filed in c	compliance with RULE 1104.	
	1 the Ginty a let		ll	whin for a newly drilled or deepened	
	- (Sign	ature)	If this is a request for showable for a howly done of the deviation 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 allow-		
	0ffice Manager				
	(Title)		able on new and recompleted wears.		
	12-4-78		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		
	(D	ate)			
			completed wells.		