

DISTRIBUTION		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 1-1-55	
SANTA FE							
FILE							
U.S.G.S.							
LAND OFFICE							
TRANSPORTER	OIL						
	GAS						
OPERATOR							
PRORATION OFFICE							
Operator Flag-Redfern Oil Company							
Address P.O. Box 11050 Midland, Texas 79702							
Reason(s) for filing (Check proper box)				Other (Please explain)			
New Well	<input type="checkbox"/>	Change in Transporter of:					
Recompletion	<input type="checkbox"/>	Oil	<input checked="" type="checkbox"/>	Dry Gas	<input type="checkbox"/>		
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>	Condensate	<input type="checkbox"/>		
If change of ownership give name and address of previous owner							
DESCRIPTION OF WELL AND LEASE							
Lease Name	Well No.	Pool Name, Including Formation		Kind of Lease	Fee	Lease No.	
Southard "A"	2	Tom-Tom (San Andres)		State, Federal or Fee			
Location							
Unit Letter	H	1980	Feet From The	North	Line and	660	Feet From The
						East	
Line of Section	26	Township	7S	Range	31E	NMPM,	Chaves
						County	
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)			
Lantern Petroleum Company				P.O. Box 2281 Midland, TX 79702			
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/>		or Dry Gas <input type="checkbox"/>		Address (Give address to which approved copy of this form is to be sent)			
Cities Service Company				P.O. Box 300 Tulsa, OK 74102			
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Pge.	Is gas actually connected?	When	
	G	26	7S	31E	yes	11/79	
If this production is commingled with that from any other lease or pool, give commingling order number:							
COMPLETION DATA							
Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back
Date Spudded	Date Compl. Ready to Prod.		Total Depth		F.B.T.D.		
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		
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	Date of Test		Producing Method (Flow, pump, gas lift, etc.)				
Length of Test	Tubing Pressure		Casing Pressure		Choke Size		
Actual Prod. During Test	Oil-Bbls.		Water-Bbls.		Gas-MCF		
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		
CERTIFICATE OF COMPLIANCE				OIL CONSERVATION COMMISSION			
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.				APPROVED <u>JAN 30 1985</u> , 19			
				BY <u>Eddie W. Seay</u>			
				Oil & Gas Inspector			
				TITLE			
Senior Proration Analyst				This form is to be filed in compliance with RULE 1104.			
1-25-85				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.			
(Date)				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 multiply completed wells.			

RECEIVED

JAN 28 1985

O.C.D.  
HOSB OFFICE