

ANTA FE

FILE

S.G.S.

LAND OFFICE

TRANSPORTER

OPERATOR

PRODUCTION OFFICE

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

Flag-Redfern Oil Company

Address

P.O. Box 11050Midland, Texas 79702

Reason(s) for filing (Check proper box)

Other (Please explain)

New Well

Change In Transporter of:

Oil

Dry Gas

Change In Ownership

Casinghead Gas

Condensate

Change of ownership give name

Address of previous owner

DESCRIPTION OF WELL AND LEASE

Well Name

Well No.

Pool Name, Including Formation

Kind of Lease

Lease No.

Southard "A"

2

Tom-Tom (San Andres)

State, Federal or Fee

Fee

Location

Unit Letter

H

1980

Feet From The

North

Line and

660

Feet From The

East

Line of Section

26

Township

7-S

Range

31-E

NMPM,

Chaves

County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil

or Condensate

Address (Give address to which approved copy of this form is to be sent)

Tesoro Crude Oil Company

8700 Tesoro Drive, San Antonio, TX 78286

Name of Authorized Transporter of Casinghead Gas

or Dry Gas

Address (Give address to which approved copy of this form is to be sent)

Cities Service Company

P.O. Box 300, Tulsa, OK 74102

Well produces oil or liquids,

Unit

Sec.

Twp.

Rge.

Is gas actually connected?

When

Location of tanks.

H

26

7-S

31-E

yes

November, 1979

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

Some Res'v.

Diff. Res'v.

Date Spudded

Date Compl. Ready to Prod.

Total Depth

P.B.T.D.

Deviation (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

(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)

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

AS 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

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

BY

TITLE

Original Signed by Jerry Sexton

DISTRICT SUPERVISOR

July 2, 1984

Production Clerk

(Date)

(Signature)

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 multiply completed wells.

RECEIVED

JUL 5 - 1984

O.C.D.
MOBES OFFICE