	NO. OF COPIES RECEIVED	4						•				
	DISTRIBUTION SANTA FE		CONSERVATION COMMININ T FOR ALLOWABLE AND RANSPORT OIL AND NATURAL GAS				Form C-104 Supersedes Old C-104 and C-11					
	U.S.G.S.	א דח דפי					Eflective 1-1-6	5				
	LAND OFFICE	AND OFFICE					THE OLD AND NATURAL GAS					
	TRANSPORTER GAS	-										
	OPERATOR	-										
1.	PRORATION OFFICE	1										
	Operator Southern Union Supply Company											
	Address Suite 1800, First International Bldg., Dallas, Texas 75270											
	Reason(s) for filing (Check proper box)	ar Diug.,	Dallas) ise explain)			·····		
	New Well	Chang Oll	e in Transporte	1								
	Recompletion Change in Ownership	Dry Gas										
	If change of ownership give name							······				
	and address of previous owner			**************************************					<u></u>			
И.	DESCRIPTION OF WELL AND LEASE Lease Name Well No. Pool Name, Including Formation						Kind of Lease		.	Lease No.		
	Supco State	2					State, Federa	Re, Faderal or Fee State 0G-454				
	Location C 100	0			_					· /		
	Unit Letter	Feet	From The N	OFEN Lin	e and <u> </u>	980	Feet From 1	The <u>E</u> .	ast			
	Line of Section 17 Toy	wnshtp	<u>17-s</u>	Range	<u>34-e</u>	, NMP	РМ,	<u>L</u>	<u>ea</u>	County		
III.	DESIGNATION OF TRANSPOR		IL AND NA r Condensate		S Address ((Five addres	s to which approx	ed copy of	this form is t	o he sent)		
	Southern Union Refining Company					Address (Give address to which approved co First Interna Suite 1800, Dallas, Texas				tional Bldg., 75270		
	Name of Authorized Transporter of Cas Western Gas Interstate	er of Casinghead Gas cr Dry Gas				Address (bive address to which approved cop				o be sent)		
	If well produces oil or liquids, Unit Sec. Twp. Pge.				Is gas actually connected? When							
	give location of tanks. F 17 17-S 34-E					Yes		8/19/	77	·		
IV.	If this production is commingled with COMPLETION DATA	th that from	any other lea	ase or pool,	give commi	ingling ord	er number:					
	Designate Type of Completion - (X)			I Gas Well I I X	New Well	Workover	Deepen	Plug Bac	k Same Res	v. Diff. Restv.		
	Date Spudded	· ·	1 L. Ready to Pro	1	Total Dept		i	P.B.T.D.				
	5/24/77 Elevations (DF, RKB, RT, GR, etc.)	8/19/77 R. etc. j Name of Producing Formation			13550' Top Oil/Gas Pay			13440' Tubing Depth				
	4086 G.L.	4086 G.L. Morrow				13332			13180'			
	Perforations 13332' - 1336		Depth				sing Shoe 550 [†]					
		CEMENT	ING RECO	RD	·L	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·					
	HOLE SIZE					DEPTH SET			SACKS CEMENT			
	1/-1/2*	<u>17-1/2" 13-3/8"</u> 11" 8-5/8"			353'			400 (circ) 1900 (circ)				
	7-7/8" 5-1/2"				13550'				L200	C)		
					l							
γ.	TEST DATA AND REQUEST FO	JH ALLUY	ABLE (Te ab	est must be aj le for this de	pth or be for	full 24 hou			equal to or e	xceed top allow-		
	Date First New Cil Run To Tanks Date of Test				Producing Mothod (Flow, pump, gas lift, etc			t, etc.)				
	Longth of Test	Tubing Pressure			Casing Pressure			Chex+ Si	Z			
	Actual Prod. During Test	Oil-Bhis.			Water - Bbla	 3,		Gan-MC		· · · · · · · · · · · · · · · · · · ·		
	GAS WELL											
	Actual Prod. Test-MCF/D Length of Test				Bbla. Condensate/MMCF		CF	Gravity of Con				
	500 Testing Method (pitot, back pr.)	24 hours Tubing Prossure (Shut-in)			3 Casing Pressure (Shat-in)		52.5 Choke Size					
		850	•						·			
VI.	A. CERTIFICATE OF COMPLIANCE					OIL CONSERVATION COMMISSION						
	hereby certify that the rules and regulations of the Oil Conservation				APPROVED							
	Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief. (Signotwe) Chief Petroleum Engineer (Title) August 22, 1977 (Date)					BY CELL VOI						
C							to be filed in c			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 allow- able 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.						
	(Da)	Sep	Separate Forma C-104 must be filed for each pool in multi completed wells.									
				I	i romplete	SA WELLA				· · · · · · ·		

ALC 2 (1977 CIL CONSCRVATION COMM. HOBBS, N. M.