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U.S.G.S.
LAND OFFICE
TRANSPORTER <input type="checkbox"/> OIL
<input type="checkbox"/> GAS
OPERATOR
PRODUCTION OFFICE

NEW MEXICO OIL CONSERVATION COMMISSION

REQUEST FOR ALLOWABLE

AND

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form O-104

Supersedes Old O-104 and O-111  
Effective 1-1-55

I. Well Name

Person(s) for filing (check proper box)	Other (Specify)
Owner <input type="checkbox"/>	
Operator <input type="checkbox"/>	
Transporter <input type="checkbox"/>	

If change of ownership give name  
and address of previous owner

## II. DESCRIPTION OF WELL AND LEASE

County	State	Section	Range	Township	County	State	Section	Range	Township
	New Mexico	16	1N	10E	Alameda	New Mexico	16	1N	10E
Well Name	17	17	17	17	17	17	17	17	17
Depth of Well	16	16	16	16	16	16	16	16	16

## III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Designated Transporter	Address
Warren Petroleum	Box 111, Monument, New Mexico

If this production is commingled with that from one or other pools, give commingling order number

## IV. COMPLETION DATA

Designate Type of Completion - (X)

Completion Type	Designation
Perforated	Perforated

## TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	BACKS CEMENT

## 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 exceeds top of hole  
or be for full 24 hours.

Test Name	Date of Test	Producing Method	
Test New Oil Run To Tanks		Flow, pump, gas lift, etc.	
Length of Test	Flowing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Flowing Pressure	Casing Pressure	Choke Size

## GAS WELL

Actual Prod. Test-MMCF/D	Length of Test	Flowing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

## 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.

## OIL CONSERVATION COMMISSION

APPROVED \_\_\_\_\_, 19

BY \_\_\_\_\_

TITLE \_\_\_\_\_

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 O-104 must be filed for each pool in multiply completed wells.