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	NO. OF COPIES RECEIVED									
	DISTRIBUTION	NEW MEXICO OIL C	ONSERVATION COMMISSION	Form C+104						
	SANTA FE	REQUEST	Supersedes Old C-104 and C-11 Effective 1-1-65							
	FILE									
	LAND OF FICE	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS								
	TRANSPORTER OIL GAS									
	OPERATOR	4								
1.	PROPATION OFFICE	1								
	Operator NATOMAS NORTH A	NATOMAS NORTH AMERICA, INC.								
	Address									
	1000 First Place, Tulsa, OK 74103									
	Reason(s) for filing (Check proper box) Other (Please explain)									
	New Weil A Change in Transporter of: Recompletion Cil Dry Gas CASINGHEAD GAS MUST NOT BE									
	Recompletion Change in Ownership	11-1-80								
		EPTION TO R-4970								
	If change of ownership give name and address of previous owner		is obtained.							
		RIEZI								
11.	DESCRIPTION OF WELL AND	LEASE K-6536 Well No.   Pool Name, including Fo	ormation Kind of Lease	Lease No.						
	State, "24" Comm		e - Bone SpringsState, Federal o	rFee State LG-1243						
	Location	l								
	Unit Letter <u>K</u> ; <u>198</u>	30 Feet From The West Lin	e and <u>1980</u> Feet From The	South						
				Company						
	Line of Section 24 Tow	wnship 23S Range 3	<u>34Е , ммрм, Lea</u>	L County						
	DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL GA	S							
	Name of Authorized Transporter of Oil	or Condensate	Address (Give address to which approved	l copy of this form is to be sent)						
	   Southern Union Refining	2 Company	4201 Singren Drive, Irv	ing, Texas 75062						
٠	None of Authorized Transporter of Cas	singhead Gas or Dry Gas	Address (Give address to which approved	i copy of this form is to be sent)						
		Unit Sec. Twp. P.ge.	Is gas actually connected? When							
	If well produces oil or liquids, give location of tanks.			4						
			rive commingling order number:							
-	If this production is commingled with COMPLETION DATA	th that from any other lease or pool,								
•••	Designate Type of Completic	Oil Well Gas Well		Plug Eack Same Res'v. Diff. Res'v.						
			Total Depth	P.B.T.D.						
	Date Spudded 2-23-80	Date Compl. Ready to Prod. 8-7-80	13,900'	12,380'						
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth						
	3372' GR	Bone Springs		;						
	Perforations (SEE ATTACH	ED PAGE) 9882-1080		Depth Casing Shoe 13,899'						
		1 -	CEMENTING RECORD							
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT						
	26"	20"	739'	925 sx HLC - 400 sx CLC						
	17 <sup>1</sup> 2"	13-3/8"		2550 sx HLC - 350 sx CLC						
	12 <sup>1</sup> 2''	9-5/8"	12,050'	6 <u>00 sx HLC - 350 sx Cl H</u>						
				d must be equal to as exceed ton allow-						
v.	TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a able for this de	fter recovery of total volume of load oil an epth or be for full 24 hours)							
	OIL WELL Date First New Cil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift,	elc.)						
	7/6/80	8/7/80	Flow	Choke Size						
	Length of Test 24 hrs	Tubing Preseure 60 psi	Casing Pressure O	1"						
	Actual Pred. During Test	Oll-Bble.	Water-Bbis.	Gas - MCF						
		7	0	TSTM - Vented						
	GAS WELL		Bbis. Condensate/MMCF	Gravity of Condensate						
	Actual Prod. Test-MCF/D	Length of Test								
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size						
			<u> </u>							
VI.	CERTIFICATE OF COMPLIAN	CE	OIL CONSERVAT	ION COMMISSION						
			APPROVED SEL	2.18						
	I hereby certify that the rules and	regulations of the Oil Conservation with and that the information given	AFFROYED							
	above is true and complete to the	e best of my knowledge and belief.	BY CIUDING OF AISTRICT							
			TITLE SUPERVISOR DISTRICT.							
	$\frown$		This form is to be filed in compliance with RULE 1104.							
	Immulla		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 well, this form must be accompanied by a tabulation of the deviation							
	D. II. Hurren	ature)								
		n Manager	All sections of this form must be filled out completely for allow-							
		(tle) .	able on new and recompleted workers							
	September (D	4, 1980	Fill out only Sections 1, 11, 11, and the such change of condition. well name or number, or transporter, or other such change of condition.							

Fill out only Sections I. II. III, and the such change of co well name or number, or transporter, or other such change of co					
Separate Form	C-104	must be	filod	for each pool	in multiply

## IV. COMPLETION DATA

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PERFORATION RECORD (Interval, size and number)

13,346-13,352'	6'	12 holes	Abandoned w/CIBP @ 13,200'
12,973-12,981'	81	16 holes	Abandoned w/tbg plug & 10' cmt @ 12,800'
12,596-12,616'	20'	40 holes	Abandoned w/tbg plug & 10' cmt @ 12,380'
10,835-10,842'	7'	14 holes	
10,850-10,866'	16'	32 holes	
9882-9893'	11'	22 holes	

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