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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

INLAND CORPORATION PURCHASED ALL THE ASSETS
OF BOTH LAMAR TRUCKING, INC. AND INLAND CRUDE,
INC. THIS PURCHASE INCLUDED N. M. S. C. C.
PERMIT # 670 WHICH HAS BEEN TRANSFERRED TO
INLAND CORPORATION.

CLYDE C. LAMAR, PRESIDENT
INLAND CORPORATION

Operator
Walker Bros. Oil Company
Address
P.O. Box 776 Durango, Colorado (P.O. Box 18715 Oklahoma City, Oklahoma)

Reason(s) for filing (Check proper box)

New Well ☐ Change in Transporter of:
Recompletion ☒ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

Other (Please explain)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Santa Fe	Well No. 3	Pool Name, Including Formation Hospah Gallup	Kind of Lease State, Federal or Fee Fee
Location Unit Letter D ; 660 Feet From The North Line and 660 Feet From The West Line of Section 7 , Township T7N Range 8W , NMPM, McKinley County			

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Lamar Trucking Company, Inc.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1528, Farmington, New Mexico
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks.	Unit D Sec. 7 Twp. T7N Rge. 8W Is gas actually connected? No When

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
				X			X	
Date Spud'd 10-23-65	Date Compl. Ready to Prod. 10-31-65	Total Depth 1549	P.B.T.D. 1547					
Pool Hospah	Name of Producing Formation Gallup	Top Oil/Gas Pay 1506	Tubing Depth 1540					
Perforations 1506-10; 1516-30; 1532-40			Depth Casing Shoe 1547					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE 12" 6 3/4"	CASING & TUBING SIZE 8 5/8" 4 1/2" 2 3/8"		DEPTH SET 37' 1547' 1540'		SACKS CEMENT 7 75			

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 exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks 10-31-65	Date of Test 10-31-65 to 11-1-65	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hours	Tubing Pressure 0	Casing Pressure 0	Choke Size 2
Actual Prod. During Test 144 BBLs	Oil-Bbls. 136 BBLs.	Water-Bbls. 8 BBLs	Gas-MCF None

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size

VI. 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.

Gloria Theurer
(Signature)

Secretary
(Title)

11-2-65
(Date)

OIL CONSERVATION COMMISSION

APPROVED **NOV 3 1965**, 19

BY **Original Signed Emery C. Arnold**

TITLE **Supervisor Dist. # 2**

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 Sections I, II, III, and VI only 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.