	SANTA FE /		CONSERVATION COMMISSION T FOR ALLOWABLE AND	Form C 104 Supersedes Old C-104 and (Effective 1-1-65
	U.S.G.S. LAND OFFICE TRANSPORTER OIL 2 GAS	AUTHORIZATION TO TR	RANSPORT OIL AND NATURAL	A
3	OPERATOR / PRORATION OFFICE Operator	a:1 0		
	Address Caneco O, Company			
	Reason(s) for filing (Check proper bo New Well Recompletion Change in Ownership	Change in Transporter of: Oil Dry C	Other (Please explain) Dual Irans	porters 4-1-74
	If change of ownership give name and address of previous owner			
II	DESCRIPTION OF WELL AND Lease Name Liene Line Daketa Di	LEASE. Well No. Pool Name, Including Lone Pin	Formation Kind of Leas State, Federa	Lease No
	Unit Letter ; 2	980 Feet From The West	ine and 1710 Feet From	The South
1	Line of Section 7 To	ownship /7 Range	8, NMPM, MEK	in ley County
111	DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL G		
	Name of Authorized Transporter of Oil or Condensate Address (Give address to which approved copy of this form is to be sent) 5101 E. Main, Forming form, New Mexic 1215 Take, Forming form, New Mexic Name of Authorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent)			
	If well produces oil or liquids, Unit Sec. Twp. Rge. Is gas actually connected? When give location of tanks.			
IV.	If this production is commingled with that from any other lease or pool, give commingling order number: COMPLETION DATA Oil Well Gas Well New Well Workston Description Desc			
	Designate Type of Completi	on - (X)	New Well Workover Deepen	Plug Back Same Restv. Diff. Rest
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
	Elevations (DF, RKB, RT, GR, etc.) Perforations	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
	Depth Casing Shoe			
	HOLE SIZE		D CEMENTING RECORD	
	71022 3122	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
			(CENTRAL	
V.	TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total upitme of less bil and must be equal to or exceed top allowable.) OIL WELL			
	OH, WELL Date First New Oil Run To Tanks	able for this de	Producting Method (Flow, pumposage lif	
	Length of Test	Tubing Pressure	Casing Pressure OIL CON. COM.	Choke Size
	Actual Prod. During Test	OII-Bble.	Water-Bbls. DIST. 3	Gas-MCF
	GAS 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 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 APR 4 1974 APPROVED	
			Original Signed by A. R. Kendrick	
				GINEER DIST. NO. 3
-	Carley Il	atkins	This form is to be filed in confirmation of this is a request for allower	able for a newly drilled or descene
	S Signa	pure)	well, this form must be accompantests taken on the well in accord	ied by a tabulation of the deviatio lance with RULE 111.

(Title)

(Date)

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