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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

Operator COLORADO PLATEAU GEOLOGICAL SERVICES, INC.	
Address P. O. Box 537, Farmington, New Mexico 87401	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Henry S. Birdseye (deceased)	

If change of ownership give name and address of previous owner Henry S. Birdseye, P. O. Box 8294, Albuquerque, New Mexico 87108

II. DESCRIPTION OF WELL AND LEASE

Lease Name Federal A	Well No. 1-A	Pool Name, including Formation undesignated Menefee	Kind of Lease State, Federal or Fee Federal	Lease No. 02-5448
Location				
Unit Letter H	1930'	Feet From The North Line and 660	Feet From The East	
Line of Section 30	Township 20 North	Range 9 West	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"/> Thriftway, Inc.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1367, 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 0	Sec. 30
	Twp. 20N	Rge. 9W
	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 <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 4-30-72	Date Compl. Ready to Prod. 5-9-72	Total Depth 1085'	P.B.T.D.					
Elevations (DF, RKB, RT, GR, etc.) GR	Name of Producing Formation Menefee	Top Oil/Gas Pay 1059'	Tubing Depth 1080'					
Perforations None			Depth Casing Shoe 1060'					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE 6 1/2"	CASING & TUBING SIZE 4 1/2" 9.5#		DEPTH SET 1060'		SACKS CEMENT 95 sacks			
	2" upset		1080'					

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 5-9-72	Date of Test 5-9-72	Producing Method (Pump, etc.) Pump
Length of Test 24 hours	Tubing Pressure	Casing Pressure
Actual Prod. During Test 20 bbls. fluid	Oil-Bble. 9	Water-Bble. 0

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bble. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	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.

President, Colorado Plateau Geological Services, Inc.

October 19, 1973

OIL CONSERVATION COMMISSION

APPROVED OCT 23 1973

Original Signed by Emery C. Arnold

TITLE SUPERVISOR DIST. #3

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