NO. OF COPIES RECEIVED		4		
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SANTA FE				
FILE	Ĭ			
U.S.G.S.				
LAND OFFICE				
TRANSPORTER	OIL			
THANS! SITTER	OIL GAS /			
OPERATOR		1		
PRORATION OF	FICE			
Operator				

SANTA FE	7	NEWM	REQUEST				Old C-104 and C-11	
FILE	47	AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS						- 65
U.S.G.S.		AUTHORIZAT	ION TO TRA	NSPORT	OIL AND NA	ATURAL G	SAS	
OIL								
TRANSPORTER GAS	7							
OPERATOR	1							
PRORATION OFFICE Operator								
Dyna Ray Oil	& Gas	Co., Inc.						
4101 E. Louis	iana	Ave., Denver	r, Color	ado 80	0222			
Reason(s) for filing (Check pr			_		Other (Please e	xplain)		
New Well		Change in Transpo	orter of: Dry Go	, <u> </u>				
Recompletion Change in Ownership		Casinghead Gas	Conder	=				
If change of ownership give		Irving Pas	sternak	dhe Si	har_Alar	011 C	0	
and address of previous ow DESCRIPTION OF WELL		4101 E. L						
Lease Name	C AND I	Well No. Pool Na	ıme, İncluding F	ormation	Ŧ	(ind of Lease		Lease No.
Hall-Federal		2 So B	lanco Pi	ctured	Cliffs	edera	1 % 5	F 080515-
Location	700	•	Ma & b	7 (950		Voca	
Unit Letter B	790	Feet From The	NOTER Lin	ne and	000	Feet From	The <u>East</u>	
Line of Section 7	Tow	mship 23N	Range	1W	, NMPM,	Rio A	rriba	County
DESIGNATION OF TRA	NSPORT	or Condensat		Address (Give address to	which appro	ved copy of this form i	s to be sent)
Name of Authorized Transpor	ter or orr	Or Condensate		1134.352 (•
'Name of Authorized Transpor	ter of Cas	inghead Gas or D	Ory Gas 🕎	Address (Give address to	which appro	ved copy of this form	s to be sent)
El Paso Natur				El P	aso, Tex	as B	0 1492	
If well produces oil or liquid			wp. Rge.	Is gas act	ually connected	l? Wh		1413
give location of tanks.				Yes		···-	August 1001	1963
If this production is commi	ngled wit	h that from any other	lease or pool,	give comm	ingling order	number:		
COMPLETION DATA		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back Same I	Restv. Diff. Rest
Designate Type of C	ompletio	on - (X)	!	-	!	1		
Date Spudded		Date Compl. Ready to	Prod.	Total Dep	th		P.B.T.D.	
		Name of Producing Formation Top Oil/Gas Pay		Tuhing Danit				
Elevations (DF, RKB, RT, G	R, etc.;	Name of Producing Fo	rmation	Top Oil/G	as hah		Tubing Depth	
Perforations .		J					Depth Casing Shoe	
		TUBING	, CASING, AN	D CEMENT				
HOLE SIZE		CASING & TUBING SIZE DEPTH SET		<u>T</u>	SACKS CEMENT			
					·			
. TEST DATA AND REQ	UEST F	OR ALLOWABLE	(Test must be	after recover	y of total volum	ne of load oil	and must be equal to	or exceed top allo
OIL WELL		Date of Test	able for this d		r full 24 hours, Method (Flow,		ift, etc.)	
Date First New Oil Run To	Conks	Date of lest		1100001114	,	, ,		THE STATE OF
Length of Test		Tubing Pressure		Casing Pi	essure		Choke Size)	
							January Sal	
Actual Prod. During Test		Oil-Bbls.		Water-Bb	la.		Gas-MCF	A TOPE A
		1						= 1000
GAS WELL							/OIL COM	
Actual Prod. Test-MCF/D		Length of Test		Bbls. Cor	ndensate/MMCF	,	Gravity of Color	iqte 3
						4		Market Ma
Testing Method (pitot, back	pr.)	Tubing Pressure (Shu	at-in)	Casing P	ressure (Shut-	-1 u)	Choke Size	
					011 0	ONSERV	ATION COMMISS	ION
. CERTIFICATE OF CO	nPLIAN	CE					D	
I hereby certify that the r	ules sed	regulations of the Oil	1 Conservation	APPR	OVED		DEC 4	_ ia ba
Commission boss boom o	omolied 1	with and that the IDI	formation given				Z Emery C. Ar	
above is true and comple	te to the	e pest of my knowled	rRe sud benei.	. ∥ av —	·		-	
	_	α		TITLESUPERVISOR DIST. #3			•	
\mathcal{A}_{i}	11			T	nis form is to	be filed in	compliance with R	ULE 1104.
	去女	ay	 	11 49 A		he eccomp	wable for a newly denied by a tabulation	IL OF THE GRATER
1/-	(Sign	nature		tests t	aken on the	well in acco	ordance with Rule	111.
<u> </u>	· · · · · · · · · · · · · · · · · · ·	itle)		· A	l sections of	this form m	ust be filled out covells.	mpletely for allo
//	(- <i>20</i>)	- 68		-	il and and to	I sections	TI TIT and VI for	changes of own
	(D	ate)		well n	ame or number	r, or transpo	rter, or other such ci	sauge of condition
				comple	eparate Formi	C-104 mu	st be filed for eac	a poor in murci
				,,	-			