	NO. OF COPIES RECEIVED	NEW MEXICO OIL (	CONSERVATION COMMISSION	Form C~104
	SANTA FE /		FOR ALLOWABLE	Supersedes Old C-104 and C-1.  Effective 1-1-65
	U.S.G.S.	AUTHOPIZATION TO TR	AND ANSPORT OIL AND NATURAL	
	LAND OFFICE	AUTHORIZATION TO TR	ANSPORT OIL AND NATURAL	GAS
	TRANSPORTER OIL	_		
	OPERATOR /	_		
I.	PRORATION OFFICE Operator			
	Dyna Ray Oil & Gas Co., Inc.			
	4101 F. Louisiana Ave., Denver, Colorado  Reason(s) for filing (Check proper box)  Other (Please explain)			
	New Well	Change in Transporter of:	Other (Please explain)	
	Recompletion	Oil Dry Go	as 🔲	
	Change in Ownership	Casinghead Gas Conde	nsate	
	If change of ownership give name and address of previous owner	Irving Pas	ternak, dba Shar-Al	an Oil Co.
		4101 E. Lo	uisiana Ave., Denve	
П.	DESCRIPTION OF WELL AND Lease Name	Well No. Pool Name, Including F	ormation Kind of Lea	se Lease No.
	Ticamillo "A" -		State Fode	
	Location			
		50 Feet From The South Lir		
	Line of Section 7 Tov	wnship 23N Range	2W , NMPM, Ri	O Arriba County
III.	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA		oved copy of this form is to be sent)
	Name of Authorized Transporter of Cas			
	-X			
	If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected?	hen
	give location of tanks.		Yes	August 1963
		th that from any other lease or pool,	give commingling order number:	
14.	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.
	Designate Type of Completic	on — (X)		
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
	Perforations			Depth Casing Shoe
	TUBING, CASING, AND CEMENTING RECORD			
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
v.	TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to of exceed top allow-			
i	OIL WELL	able for this de	pth or be for full 24 hours)	MELLIN TO A STATE OF THE STATE
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas	Lift, etc.
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size
	Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas-MCF DIST
i	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)	Coming Pressure (Shut-in)	Choke Size
VI.	CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION	
I hereby certify that the rules and regulations of the Oil Conservation			APPROVED	

## VI.

Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Original Signed by Emery C. Arnold

SUPERVISOR DIST.

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. Separate Forms C-104 must be filed for each pool in multiply completed wells.