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LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	3
PRORATION OFFICE	

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 LYNCO OIL CORPORATION	
Address 7890 E. Prentice Ave., Englewood, Colorado 80110	
Reason(s) for filing (Check proper box)	
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input checked="" type="checkbox"/>	Oil <input type="checkbox"/>
Change in Ownership <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/>
	Dry Gas <input type="checkbox"/>
	Condensate <input type="checkbox"/>
Other (Please explain)	
If change of ownership give name and address of previous owner	
Trans Delta Oil & Gas Co., Inc. 1008 Ridglea Bank Bldg. Fort Worth, Texas 76116	

II. DESCRIPTION OF WELL AND LEASE

Lease Name Hanson Federal	Well No. 2	Pool Name, including Formation South Blanco PC	Kind of Lease State, Federal or Fee Federal	Lease No. NM0175779
Location				
Unit Letter H	1595	Feet From The North	Line and 800'	Feet From The East
Line of Section 6	Township 23N	Range 1W	, NMPM, Rio Arriba County	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/>	or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/>	or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
El Paso Natural Gas Company		P. O. Box 1492, El Paso, Texas	
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.
			Pge.
Is gas actually connected?		When	
Yes		1963	

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't.	Diff. Res't.
		X			X			
Date Spudded 5/16/75	Date Compl. Ready to Prod. 8/5/1975		Total Depth 3380		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.) 7589 GR	Name of Producing Formation Pictured Cliffs		Top Oil/Gas Pay 3331		Tubing Depth 3310			
Perforations Ran Perforated Liner	3290-3380				Depth Casing Shoe 3340			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
7 7/8"	4 1/2" casing		3331		?			
3 1/2"	2 1/2" Liner		3340-80		NONE			
	1" Tubing		3310					

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be after recovery of total volume of load oil and must be sufficient to exceed top allowable for this depth or be for full 24 hours)

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

GAS WELL

Actual Prod. Test-MCF/D 878	Length of Test 3 hrs	Bbls. Condensate/MMCF NONE	Gravity of Condensate NONE
Testing Method (pitot, back pr.) Back Pressure	Tubing Pressure (Shut-in) 412	Casing Pressure (Shut-in) 432	Choke Size 3/4"

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.

ORIGINAL SIGNED BY
E. L. FUNDINGSLAND, JR.

(Signature)

Vice President

(Title)

October 30, 1975

(Date)

OIL CONSERVATION COMMISSION

APPROVED NOV 1 1975, 19
BY ORIGINAL SIGNED BY N. E. MAXWELL, JR.
TITLE PETROLEUM ENGINEER DIST. NO. 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.

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