NO. OF COPIES RECEIVED										
DISTRIBUTION	_	NEW MEXICO OIL CONSERVATION COMMISSION						rm C-104		
SANTA FE		REQUEST FOR ALLOWABLE						Supersedes Old C-104 and C-		
U.S.G.S.	⊣			AND				fective 1-1-6	5	
LAND OFFICE	_ AUTH	HORIZATI	ON TO TR	ANSPORT	OIL AND N	NATURAL	GAS			
TRANSPORTER OIL /										
GAS										
OPERATOR 2										
PRORATION OFFICE Operator										
Skelly Oil Comp	eny	<del></del>								
P.O. Box 730 B	lobbs, New	Mexico	<b>)</b>	· <del> · · · · · · · · · · · · · · · ·</del>	Other (Please					
New Well		in Transport			Omer (Flease	explain)				
Recompletion	011	I	Dry G	as 🗌						
Change in Ownership	Casingh	ead Gas	Conde	ensate 🔲						
f change of ownership give name										
nd address of previous owner										
DESCRIPTION OF WELL AND Lease Name		I Day Mari	e, Including F	7	<del></del>	1613 -4 5			1	
	_					Kind of Lea	se alor Fee <b>Fe</b> e	41	Lease No.	
Jicarilla "D"	2	UBGGS	ignated	estinh		Sidile, I edel	di ci i ee 16	BELST		
Unit Letter "A" : 99		<b>W</b> -	-+h	Q	90		Pas	•		
	M	The NC								
Unit Letter ; 3	Feet Fr	rom The No	Li:	ne and		Feet From	The <b>Eas</b> 1			
	Feet Fr		Range	AW	, имрм,		Arriba	<u> </u>	County	
Line of Section 5 To DESIGNATION OF TRANSPOR	wnship 23	AND NA	Range TURAL GA	4W	, NMPM <b>,</b>	Rio	Arriba	- W		
Line of Section 5 To  DESIGNATION OF TRANSPOR  Name of Authorized Transporter of Oil  Rock Island Oil & B  Name of Authorized Transporter of Ca	TER OF OIL  Control	AND NA Condensate Company,	Range TURAL GA	AS Address (6	, NMPM, ive address to	Rigowhich approach, Ferm		his form is to	be sent)	
Line of Section 5 To  DESIGNATION OF TRANSPOR  Name of Authorized Transporter of Oil  Rock Island 011 & B	TER OF OIL  Control	Condensate Company, or Dry	Range TURAL GA	AS Address (6 49) Address (6	, NMPM, ive address to	Rico which approach to the property of the pro	Arriba	his form is to	be sent)	
Line of Section 5 To  DESIGNATION OF TRANSPOR  Name of Authorized Transporter of Oil  Rock Island Oil & B  Name of Authorized Transporter of Ca  Name of Authorized Transporter of Ca	TER OF OIL OF CALE	Condensate Company or Dry c. Twp.	Range TURAL GA Inc. Gas	AS Address (6 49) Address (6	, NMPM, ive address to ive address to	Rico which approach to the property of the pro	oved copy of the c	his form is to	be sent)	
Line of Section 5 To  DESIGNATION OF TRANSPOR  Name of Authorized Transporter of Oil  Rock Island Oil & B  Name of Authorized Transporter of Ca  Name Gas being vent  If well produces oil or liquids, give location of tanks.  It this production is commingled wi	TER OF OIL OF CALE	Company, Company, Twp.	TURAL GA Inc. Gas Rege. 3N 4W	AS Address (6 A9) Address (6 Is gas actu	, NMPM,  live address to  live address to  ally connecte	Rico which appropriate the which appropriate d?	oved copy of the c	his form is to	be sent)	
Line of Section 5 To  DESIGNATION OF TRANSPOR Name of Authorized Transporter of Oil  Rock Island Oil & B  Name of Authorized Transporter of Ca  Bone-Gas being vent  If well produces oil or liquids, give location of tanks.	TER OF OIL Or Or Oldering Conghead Gas Conghead	Company, Company, Twp.	TURAL GA Inc. Gas Rege. 3N 4W	AS Address (6 A9) Address (6 Is gas actu	, NMPM,  live address to  live address to  ally connecte	Rico which appropriate the which appropriate d?	oved copy of the c	his form is to New Hex his form is to	be sent)  LCO  be sent)	
Line of Section 5 To  DESIGNATION OF TRANSPOR Name of Authorized Transporter of Oil  Rock Island Oil & B  Name of Authorized Transporter of Ca  Wone-Gas being vent  If well produces oil or liquids, give location of tanks.  If this production is commingled with the complete of tanks.	TER OF OIL Or Or Oldering Conghead Gas Conghead	Condensate Company, Torpy  Twp.  Twp.  2 any other leaders	TURAL GA Inc. Gas Rege. 3N; 4W ase or pool,	AS Address (6 A9) Address (6 Is gas actu	, NMPM, live address to	Rico which appropriately will be a property of the control of the	oved copy of the c	his form is to New Hex his form is to	be sent)  LCO  be sent)	
Line of Section 5 To  DESIGNATION OF TRANSPOR Name of Authorized Transporter of Oil  Rock Island Oil & B  Name of Authorized Transporter of Ca  Hone—Gas being vent  If well produces oil or liquids, give location of tanks,  It this production is commingled with the production of tanks,  OMPLETION DATA  Designate Type of Completic	TER OF OIL  TER OF	Condensate Company, Torpy  Twp.  Twp.  2 any other leaders	TURAL GA Inc. Gas Rege. 3N; 4W ase or pool,	AS Address (6 Agdress (6 Aggreen Address (6 Aggreen Address (6 Add	, NMPM,	Rico which appropriately will be a property of the control of the	oved copy of the sington, loved copy of the hen	his form is to New Hex his form is to	be sent)  LCO  be sent)	
Line of Section 5 To  DESIGNATION OF TRANSPOR Name of Authorized Transporter of Oil  Rock Island Oil & B  Name of Authorized Transporter of Ca  Hone—Gas being vent  If well produces oil or liquids, give location of tanks,  It this production is commingled with the production of tanks,  OMPLETION DATA  Designate Type of Completic	TER OF OIL  TER OF	Condensate Company, or Dry c. Twp. 5 2 any other leading to Pro	TURAL GA  Inc.  Gas  Page.  3N; 4W  ase or pool,  Gas Well	AS Address (6 Agdress (6 Aggreen Address (6 Aggreen Address (6 Add	, NMPM,  ive address to  ive address to  cally connecte  mgling order  Workover	Rico which appropriately will be a property of the control of the	oved copy of the sington, loved copy of the hen	his form is to	be sent)  LCO  be sent)	
Line of Section 5 To  DESIGNATION OF TRANSPOR Name of Authorized Transporter of Oil  Rock Island Oil & B  Name of Authorized Transporter of Ca  Wone-Gas being vent  If well produces oil or liquids, give location of tanks.  If this production is commingled with this production is commingled with the completion of tanks.  Designate Type of Completion DATA  Designate Type of Completion Date Spudded	TER OF OIL  TER OF OIL  TER OF OIL  TER OF OIL  TO THE OF OIL  TO THE OIL  TO	Condensate Company, or Dry c. Twp. 5 2 any other leading to Pro	TURAL GA  Inc.  Gas  Page.  3N; 4W  ase or pool,  Gas Well	AS Address (6 A9 Address (6 Ro give commi	, NMPM,  ive address to  ive address to  cally connecte  mgling order  Workover	Rico which appropriately will be a property of the control of the	oved copy of the c	Same Res	be sent)	
DESIGNATION OF TRANSPOR Name of Authorized Transporter of Oil  Rock Island Oil & B Name of Authorized Transporter of Ca  Mone—Gas being vent  If well produces oil or liquids, give location of tanks.  It this production is commingled with the production of tanks.  Designate Type of Completion Data  Date Spudded  Elevations (DF, RKB, RT, GR, etc.)	TER OF OIL  TER OF OIL  Or Clefining	Condensate Company, Condensate Company, Condensate Company, Condensate Company, Condensate Condensa	Range TURAL GA Inc. Gas Rege. 3N; 4W ase or pool, Gas Well bd.	AS Address (6 A9) Address (6 Is gas actu No give commi New Well Total Dept	, NMPM, ive address to	Rico which appropriate which appropriate which appropriate with a propriate with a propriat	oved copy of the sington, loved copy of the hen Plug Back P.B.T.D. Tubing Dep	Same Res	be sent)  LCO  be sent)	
DESIGNATION OF TRANSPOR Name of Authorized Transporter of Oil  Rock Island Oil & B Name of Authorized Transporter of Ca  Mone—Gas being vent  If well produces oil or liquids, give location of tanks.  It this production is commingled with the production of tanks.  Designate Type of Completion Data  Date Spudded  Elevations (DF, RKB, RT, GR, etc.)	TER OF OIL  TER OF OIL  TO CRETINING OF CRET	Condensate Company, Condensate Company,	TURAL GA  Inc.  Gas Fige.  Sase or pool,  Gas Well  ASING, ANI	AS Address (6 A9) Address (6 Is gas actu No give commi New Well Total Dept	, NMPM,  ive address to  ive address to  cally connecte  mgling order  Workover	Rico which appround a property of the property	Plug Back P.B.T.D.  Depth Casi	Same Res	be sent)  LCO  be sent)  v. Diff. Rest	
DESIGNATION OF TRANSPOR Name of Authorized Transporter of Oil Rock Island Oil & B Name of Authorized Transporter of Ca Bone-Gas being vent If well produces oil or liquids, give location of tanks. If this production is commingled with this production is commingled with the completion of tanks. Designate Type of Completion DATA  Designate Type of Completion Date Spudded Elevations (DF, RKB, RT, GR, etc.) Perforations	TER OF OIL  TER OF OIL  TO CRETINING OF CRET	Condensate Company, Condensate Company, Condensate Company, Condensate Company, Condensate Condensa	TURAL GA  Inc.  Gas Fige.  Sase or pool,  Gas Well  ASING, ANI	AS Address (6 A9) Address (6 Is gas actu No give commi New Well Total Dept	, NMPM,  ive address to  ive address to  ially connecte  ally connecte  Workover  h  as Pay	Rico which appround a property of the property	Plug Back P.B.T.D.  Depth Casi	Same Res	be sent)  LCO  be sent)  v. Diff. Rest	
DESIGNATION OF TRANSPOR Name of Authorized Transporter of Oil Rock Island Oil & B Name of Authorized Transporter of Ca Bone-Gas being vent If well produces oil or liquids, give location of tanks. If this production is commingled with this production is commingled with the completion of tanks. Designate Type of Completion DATA  Designate Type of Completion Date Spudded Elevations (DF, RKB, RT, GR, etc.) Perforations	TER OF OIL  TER OF OIL  TO CRETINING OF CRET	Condensate Company, Condensate Company,	TURAL GA  Inc.  Gas Fige.  Sase or pool,  Gas Well  ASING, ANI	AS Address (6 A9) Address (6 Is gas actu No give commi New Well Total Dept	, NMPM,  ive address to  ive address to  ially connecte  ally connecte  Workover  h  as Pay	Rico which appround a property of the property	Plug Back P.B.T.D.  Depth Casi	Same Res	be sent)  LCO  be sent)  v. Diff. Res	
DESIGNATION OF TRANSPOR Name of Authorized Transporter of Oil Rock Island Oil & B Name of Authorized Transporter of Ca Bone-Gas being vent If well produces oil or liquids, give location of tanks. If this production is commingled with this production is commingled with the completion of tanks. Designate Type of Completion DATA  Designate Type of Completion Date Spudded Elevations (DF, RKB, RT, GR, etc.) Perforations	TER OF OIL  TER OF OIL  TO CRETINING OF CRET	Condensate Company, Condensate Company,	TURAL GA  Inc.  Gas Fige.  Sase or pool,  Gas Well  ASING, ANI	AS Address (6 A9) Address (6 Is gas actu No give commi New Well Total Dept	, NMPM,  ive address to  ive address to  ially connecte  ally connecte  Workover  h  as Pay	Rico which appround a property of the property	Plug Back P.B.T.D.  Depth Casi	Same Res	be sent)  LCO  be sent)  v. Diff. Rest	
DESIGNATION OF TRANSPOR Name of Authorized Transporter of Oil  Rock Island Oil & B Name of Authorized Transporter of Ca  Bone-Gas being vent  If well produces oil or liquids, give location of tanks.  If this production is commingled with this production is commingled with COMPLETION DATA  Designate Type of Completic Date Spudded  Elevations (DF, RKB, RT, GR, etc.)  Perforations  HOLE SIZE	TER OF OIL  TER OF OIL  TER OF OIL  TO OT OI	Condensate Company, Condensate Company, Condensate Company, Condensate Company, Condensate Company, Condensate Company, Condensate C	Range TURAL GA Inc. Gas Rege. 3N: 4W ase or pool, Gas Well cod.  ASING, ANI G SIZE	AS Address (6 A99 Address (6 Is gas actu No give commi Total Dept Top Oil/Go	, NMPM,  ive address to  ive a	number:	Plug Back P.B.T.D.  Depth Casi	Same Res	be sent)  LCO be sent)  V. Diff, Res	
DESIGNATION OF TRANSPOR Name of Authorized Transporter of Oil Rock Island Oil & B Name of Authorized Transporter of Ca Bone-Gas being vent If well produces oil or liquids, give location of tanks. If this production is commingled with this production is commingled with the COMPLETION DATA  Designate Type of Completic Date Spudded Elevations (DF, RKB, RT, GR, etc.) Perforations  HOLE SIZE	TER OF OIL  TER OF OIL  TER OF OIL  TO OT OI	Condensate Company, Condensate Company, Condensate Company, Condensate Company, Condensate Company, Condensate Company, Condensate C	Range TURAL GA Inc. Gas Rege. 3N: 4W ase or pool, Gas Well cod.  ASING, ANI G SIZE	AS Address (6 A99 Address (6 Is gas actu No give commi Total Dept Total Dept Top Oil/Go	, NMPM,  ive address to  7 E. Ma: ive address to  ially connecte  mgling order  Workover  h  as Pay  NG RECORI  DEPTH SE	number:	Plug Back P.B.T.D.  Tubing Depth Casi	Same Res	be sent)  LCO be sent)  V. Diff, Res	
DESIGNATION OF TRANSPOR Name of Authorized Transporter of Oil Rock Island Oil & B Name of Authorized Transporter of Ca Name of Authorized Transporter of Ca Name Gas being vent of well produces oil or liquids, give location of tanks.  If this production is commingled with COMPLETION DATA  Designate Type of Completion Date Spudded  Elevations (DF, RKB, RT, GR, etc.)  Perforations  HOLE SIZE  TEST DATA AND REQUEST FORM.	TER OF OIL OF OF CASING  CASING  Waship  Z3  TER OF OIL OF	Condensate Company, Condensate	Range TURAL GA Inc. Gas Rege. 3N: 4W ase or pool, Gas Well cod.  ASING, ANI G SIZE	AS Address (6 A99 Address (6 Is gas actu No give commi Total Dept Total Dept Top Oil/Go	NMPM,  ive address to  7 E. Ma:  ive address to  ive address t	number:	Plug Back P.B.T.D.  Tubing Depth Casi	Same Resorth	be sent)  LCO be sent)  v. Diff, Res	
DESIGNATION OF TRANSPOR Name of Authorized Transporter of Oil  Rock Island Oil & B Name of Authorized Transporter of Ca  Bone—Gas being vent If well produces oil or liquids, give location of tanks. If this production is commingled with this production is commingled with the production of tanks.  Designate Type of Completic Date Spudded  Elevations (DF, RKB, RT, GR, etc.)  Perforations  HOLE SIZE  TEST DATA AND REQUEST FORM.  WELL Date First New Oil Run To Tanks	TER OF OIL  TER OF OIL  Or Caffining Casinghead Gas Inc.  Unit   Section A    Unit   Section A    On - (X)    Name of Prod  CASING  OR ALLOWA	Condensate Company, Condensate	Range TURAL GA Inc. Gas Rege. 3N: 4W ase or pool, Gas Well cod.  ASING, ANI G SIZE	AS Address (6 A99 Address (6 A99 Address (6 A90 Is gas actually Total Dept Total Dept Total Dept Top Oil/Go  D CEMENTI  Ifter recovery epth or be for Producing 1	NMPM,  ive address to  7 E. Ma:  ive address to  ally connecte  Workover  Workover  NG RECORE  DEPTH SE  of total volum full 24 hours)  Method (Flow,	number:	Plug Back P.B.T.D.  Tubing Depth Casi  Solution and must be e	Same Resorth	be sent)  LCO be sent)  v. Diff, Rest	

VI. CERTIFICATE OF COMPLIANCE

Testing Method (pitot, back pr.)

Actual Prod. Test-MCF/D

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.

Length of Test

Tubing Pressure (Shut-in)

V. E. Fletcher	
 (Signature)	
District Superintendent	
(Title)	
March 1, 1967	

(Date)

SUPERVISOR DIS TITLE \_

Bbls. Condensate/MMCF

APPROVED.

Casing Pressure (Shut-in)

By Original Sag-

This form is to be filed in compliance with RULE 1104.

OIL CONSERVATION COMMISSION MAR 2 1987

Gravity of Condensate

Choke Size

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.