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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		COLONIAL PRODUCTION COMPANY		
Address		1434 Westwood Boulevard, Los Angeles, California 90024		
Reason(s) for filing (Check proper box)		Other (Please explain)		
New Well	<input type="checkbox"/>	Lease name change from France D		
Recompletion	<input type="checkbox"/>			
Change in Ownership	<input checked="" type="checkbox"/>			
Change in Transporter of:				
	Oil	<input type="checkbox"/>	Dry Gas	<input checked="" type="checkbox"/>
	Casinghead Gas	<input type="checkbox"/>	Condensate	<input type="checkbox"/>

If change of ownership give name and address of previous owner Petroleum Associates, Inc., 520 Commercial Bank Tower Bldg., Midland, Texas

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.				
Jicarilla-Apache	8	Ballard P.C.	State, Federal or Fee Indian	362				
Location								
Unit Letter	790	Feet From The	N	Line and	790	Feet From The	E	
Line of Section	8	Township	23 N	Range	4 W	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 Co.				P. O. Box 1492, El Paso, Texas 79999		
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
					Yes	4-19-67 12-66-67

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'v.	Diff. Res'v.
		X						
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
10-25-66	10-31-66	2750						
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
7065 K.B.	Pictured Cliff	2686	2669					
Perforations	Depth Casing Shoe							
2670 - 2686	2787							
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
10-3/4	7-5/8	101	50 SX					
8-5/8	4-1/2	2737	100 SX					
	1-4	2669						

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)

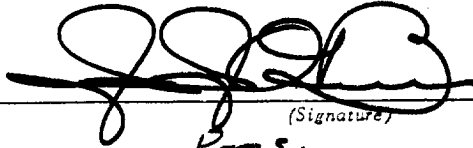
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

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


(Signature)
Pres.
(Title)
3-14-68
(Date)

OIL CONSERVATION COMMISSION

APPROVED MAR 17 1969
BY Original Signed by Emery C. Arnold
SUPERVISOR DIST. #3
TITLE _____

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 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.