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TRANSPORTER	OIL GAS 1
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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 SHERMAN F. WAGENSELLER	
Address 2444 Wilshire Blvd., Santa Monica, Cal.	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE		Kind of Lease	Lease No.
Lease Name Mobil Apache	Well No. 14	State, Federal or Fee Indian	159
Pool Name, including Formation South Blanco PC			
Location			
Unit Letter 1	1850	Feet From The S	Line and 790
Line of Section 7		Township 23N	Range 2W
		NMPM,	Rio Arriba
		County	

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS		Address (Give address to which approved copy of this form is to be sent)	
Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>			
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)		
EPNG	Farmington, N.M.		
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.
			Rge.
			Is gas actually connected?
			When
			No

If this production is commingled with that from any other lease or pool, give commingling order number:


COMPLETION DATA		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Designate Type of Completion - (X)			X	X					
Date Spudded 6-16-69	Date Compl. Ready to Prod. 7-1-69	Total Depth 3150		P.B.T.D. 3130					
Elevations (DF, RKB, RT, GR, etc.) 7302 GR.	Name of Producing Formation Pictured Cliffs	Top Oil/Gas Pay 3046		Tubing Depth 3058					
Perforations 3046 - 3076 @ 2 SPF				Depth Casing Shoe 3130					
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		SACKS CEMENT					
12 1/4	8 5/8	103		100-circ.					
7 7-8	4 1/2	3130		100					

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		Bbls. Condensate/MMCF	Gravity of Condensate
Actual Prod. Test-MCF/D 2035	Length of Test 3 hrs	Casing Pressure (Shut-in) 793 psia	Choke Size 3/4 THG
Testing Method (pitot, back pr.) Choke	Tubing Pressure (Shut-in) 790 psia		

I. 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.


Morris B. Jones, Engineer
(Title)

July 20, 1969
(Date)

OIL CONSERVATION COMMISSION
APPROVED _____, 19____
BY _____
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 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



194-8-100

STEWART C. HARRIS, JR. 1960-1961

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