	57 R1 A F E FILE	1	CONSERVATION COMMISSION FOR ALLOWABLE	Point C-104 Supersedes Old C-104 and C-11 Effective 1-1-65
	U.S.G.S.  LAND OFFICE  FRAS SORTER  GAS  OPERATOR	AUTHORIZATION TO TRA	ANSPORT OIL AND NATURA	B,K.
1.	PROPATION OF FICE			
	DAVE M. THOMAS, JR.			
	P. O. Box 2026 Farmington, N.M. 87401			
	Reason(s) for filing (Check proper box)  New Well Change in Transporter of:			
	Recompletion .	CII Dry Go	) -	
	Change in Ownership	Casinghead Gas Conde	nsate	
	If change of ownership give name and address of previous owner			
Ħ.	DESCRIPTION OF WELL AND LEASE.  Lease Name   Well No.   Pool Name, Including Formation   Kind of Lease   Jicarilla Lease No.			
	Amerada Jicarilla	4 Chacon Dako	ota Assoc. State, Fed	deral or Fee Apache   Contrac No. 167
	Unit Letter G : 1850   Feet From The North Line and 1850   Feet From The East			
		rnship 23N Range	3W , nmpm,	Rio Arriba county
		<u> </u>		
III.	DESIGNATION OF TRANSPORT Name of Authorized Transporter of Oil	or Condensate	Address (Give address to which ap	proved copy of this form is to be sent)
	Permian Oil Company Name of Authorized Transporter of Cas	inghead Gas 📉 or Dry Gas 🗀		proved copy of this form is to be sent)
	El Paso Natural Gas	COmpany	P.O. Box 990, Farm	nington, N.M. 87401
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. P.ge. G 11 23N 3W	NO NO	Unknown
	If this production is commingled wit COMPLETION DATA	h that from any other lease or pool,	give commingling order number:	
34.	Designate Type of Completio	on - (X) Gas Well	New Well Workover Deepen	Plug Back   Same Res'v. Diff. Res'v.
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
	3/9/81 Elevations (DF, RKB, RT, GR, etc.)	5/4/81 Name of Producing Formation	7625 Top Otl/Gas Pay	7526 Tubing Depth
	7225 KB	Dakota	7415'	7353 Depth Casing Shoe
	7288'-7329'; 7342'-7348'; 7399'-7415' 7353'			
			D CEMENTING RECORD DEPTH SET	SACKS CEMENT
	HOLE SIZE 12-1/4" 7-7/8"	8-5/8"	273' .	250 sacks
	7-7/8"	4-1/2"	7617'	730 sacks
		2-3/8"	7354'	
v.	TEST DATA AND REQUEST FOOL WELL	OR ALLOWABLE (Test must be a able for thin di	epth or be for full 24 hours)	oil and must be equal to or exceed top allow-
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, ga Flowing	s lift, etc.)
	7/10/81 Length of Test	7/12/81 Tubing Pressure	Casing Pressure	Choke Size
	24 hours	75 psig	500 psig	3/4" Gds-MCF
	Actual Pred. During Test	165	-0-	30
,	CAS WELL			
	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate///MCA Gravity of Condensate	
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shutable	Choke ize
			OIL CON	KATION COMMISSION
VI.	CERTIFICATE OF COMPLIANCE			JUL 141981
	I hereby certify that the rules and regulations of the Oil Conservatio Commission have been complied with and that the information give above is true and complete to the beat of my knowledge and belief			
	FOR: DAVE M. THOM		TITLE SUPERVISOR DISTRICT # 3	
ORIGINAL SIGNED BY  'EWELL N. WALSH  Ewell N. Walsh, PE (Signature) President  Walsh Engineering & Production Corp.  (Title)  7/13/81			This form is to be filed in compliance with MULE 1104.  If this is a request for allowable for a newly drilled or despending well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with MULE 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.	