

DISTRIBUTION		
DATE		
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRODUCTION 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-
Effective 1-1-85

Company Name: Chace Oil Company, Inc.
Address: 313 Washington SE, Albuquerque, NM 87108

Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input checked="" type="checkbox"/>	
Recompletion <input type="checkbox"/>	Change in Transporter of: Oil <input checked="" type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

Change of ownership give name and address of previous owner

DESCRIPTION OF WELL AND LEASE				
Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Jicarilla Apache #47	3	South Lindrith Gallup Dakota	Jicarilla State, Federal or Fee Indian	47
Location				
Unit Letter	C	Feet From The	north	Line and
		336		2310
				Feet From The
				west
Line of Section	11	Township	23N	Range
				4W
				NMPM,
				Rio Arriba
				County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS				
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)			
Mancos Corporation	P. O. Drawer 1320, Farmington, NM 87499			
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input 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, TX 79978			
Well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Range
	C	11	23N	4W
Is gas actually connected?	When			
Yes	3/2/84			

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

COMPLETION DATA									
Designate Type of Completion - (X)									
Date Spudded	Date Compl. Ready to Prod.			Total Depth			P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.)			Name of Producing Formation			Top Oil/Gas Pay			Tubing Depth
Perforations						Depth Casing Shoe			

TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

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/MCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shot-in)	Casing Pressure (Shot-in)	Choke Size

CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION	
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.		APPROVED <u>MAR 11 1986</u>	
		Original Signed by CHARLES GHOLSON	
		BY <u>DEPUTY OIL & GAS INSPECTOR, DIST. #3</u>	
		TITLE	
D. W. Miller (Signature)		This form is to be filed in compliance with RULE 1104.	
President (Title)		If this is a request for allowable for a newly drilled or deepen well, this form must be accompanied by a tabulation of the deviated tests taken on the well in accordance with RULE 111.	
3/10/86 (Date)		All sections of this form must be filled out completely for all wells 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.	
		Form C-104 must be filed for each pool in multi-	