.E	
S G.S.	
AND OFFICE	
RANSPORTER OIL	
RANSPORTER GAS	
PERATOR	
RORATION OFFICE	

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Supersedes Old C-104 and C-110
Effective 1-1-65

perator
Chace Oil Company, Inc.

ddress
313 Washington SE, Albuquerque, New Mexico 87108

eason(s) for filing (Check proper box)
- ew Well
- ecompletion
- hange in Ownership

Change in Transporter of:
- Oil [X]
- Dry Gas
- Casinghead Gas
- Condensate

Other (Please explain)

change of ownership give name
d address of previous owner

ESCRIPTION OF WELL AND LEASE

ease Name	Well No.	Pool Name, Including Formation	Kind of Lease (State, Federal or Fee)
Jicarilla Tribal Contract 47	11	South Lindrith Gallup Dakota	Jicarilla Indian

ocation
Unit Letter 'B' : 510 Feet From The North Line and 2153 Feet From The East

Line of Section 13 Township 23N Range 4W , NMPM, Rio Arriba

ESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

ame of Authorized Transporter of Oil [X] or Condensate [ ]
Petro Source Corporation
Address (Give address to which approved copy of this form is to be sent)
7443 E. Dreyfus, Scottsdale, AZ 85260

ame of Authorized Transporter of Casinghead Gas [X] or Dry Gas [ ]
El Paso Natural Gas Company
Address (Give address to which approved copy of this form is to be sent)
P. O. Box 1492, El Paso, TX 79978

If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	B	13	23N	4W	Yes	1/11/85

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

OMPLETION DATA

Designate Type of Completion – (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.

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 CEME

EST DATA AND REQUEST FOR ALLOWABLE (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)

OIL WELL

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

RECEIVED
NOV 30 1987
OIL CON. DIV.
DIST. 3

GAS WELL

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

ERTIFICATE 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.

Frank Welker
(Signature)

Vice President Production
(Title)

November 30, 1987
(Date)

OIL CONSERVATION COMMISSION

APPROVED NOV 30 1987

BY
SUPERVISOR DISTRICT # 3

TITLE

This form is to be filed in compliance with RULE

If this is a request for allowable for a newly drilled well, this form must be accompanied by a tabulation of tests taken on the well in accordance with RULE

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill only Sections I, II, III, and VI for changes