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DISTRIBUTION	NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65		
SANTA FE	REQUEST	AND	Effective 1-1-65
U.S.G.S.	AUTHORIZATION TO TRA	NSPORT OIL AND NATURAL	GAS
LAND OFFICE			
TRANSPORTER	!		
GAS	4		
PRORATION OFFICE			
operator .			
Shar-Alan Oil Con	mpany		
1402 Denver U. S	. National Center, Denver	c, Colorado 80202	
Reason(s) for filing (Check proper box)	Other (Please explain)	
tiew Well	Change in Transporter of:		
Recompletion	Casin thead Gas Conder		
'hange in Ownership	Casing.ic.ia Gao		
change of ownership give name nd address of previous owner			
DESCRIPTION OF WELL AND	Well No. Pool No	me, Including Formation	Kind of Lease
Jicarilla 'L" 160	4 So 1	Blanco Pictured Cliffs	State, Federal or Fee Indian
Location	_		- Uest
Unit Letter D ; 79	O' Feet From The North Lin	ne and 790 Feet From	n The West
16	Swinship 23 North Range 2	West , NMPM, Rio	Arriba County
Line of Section 13 , To	ownship 23 NOTER Range 2		
DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL GA	AS	roved copy of this form is to be sent)
Name of Authorized Transporter of C	or Condensate	Address (Give address to which app	rovea copy of this form is to ve sein,
		Cine address to which app	roved copy of this form is to be sent)
Name of Authorized Transporter of O		📗 1402 Denver U. S. Na	tional Center
El Paso Natural Ga		Denver, Color ado 802 Is gas actually connected?	When
If well produces oil or liquids,	Unit Sec. Twp. Rge.		upon pipeline completion
give location of tanks.	with that from any other lease or pool		
If this production is commingled w COMPLETION DATA			Plug Back Same Restv. Diff. Rest
Designate Type of Complet	ion (X)	The world	Find Date Control
	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Date Spudded	2-8-66	3100'	
10-13-65	Name of Producing Formation	Top Rix Gas Pay	Tubing Depth
So Blanco PC	Pictured Cliffs	3016'	3006' Depth Casing Shoe
Perforations			
3016-3046'		TO STATISTIC DECORD	3075'
		ND CEMENTING RECORD DEPTH SET	SACKS CEMENT
HOLE SIZE	CASING & TUBING SIZE		60
10 3/4"	7 5/8"		100
6 3/4	4 1/2 1 1/4"	- · · · · · · · · · · · · · · · · · · ·	
TEST DATA AND REQUEST	FOR ALLOWABLE (Test must be	after recovery of total volume of load	oil and must be equal to or exceed top all
OIL WELL		depth or be for full 24 hours) Producing Method (Flow, pump, ga	
Date First New Gil Hun To Tanks	Date of Test	, , ,	CELLA
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Length of Test			Gas-MCF
Actual Prod. During Test	Oil-Sbls.	Water-Bbls.	EB 17 1966
			COM
			OIL CON. COM.
GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate 3
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size
Back Pressure	960		3/4"
CERTIFICATE OF COMPLIA			RVATION COMMISSION
		APPROVEDFEB 1 8 1968	
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.		C A 1d	
		BYUTINITIES OF A STATE OF THE STATE OF	
		TITLESupervisor Dis	t. # 4
17.7		This form is to be filed	in compliance with RULE 1104.
(Signature)			allowable for a newly drilled or deepe
	Signature)	well, this form must be accordant tests taken on the well in a	mnanien ny a labulation of the devices

Mgr. of Lands & Explorations

February 16, 1966 (Date)

Fill out Sections I, II, III, and VI only 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.

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