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NO. OF COPIES RECEIVED 2	NEW MEXICO OIL	. CONSERVATION COMMISSION	Form C-104
SANTA FE /	REQUES	T FOR ALLOWABLE	Supersedes Old C-104 and C- Effective 1-1-65
FILE / L		AND	CAS
U.S.G.S.	AUTHORIZATION TO TI	RANSPORT OIL AND NATURAL	GAS
OIL			
TRANSPORTER GAS /			
OPERATOR /			
PRORATION OFFICE			
Cperator	**		
Address	Elephogen		
	tview Blvd, Denver,	Colorado	
Reason(s) for filing (Check proper b	ox)	Other (Please explain)	
New Well	Change in Transporter of:		
Recompletion	Oil Dry	Gas	
Change in Ownership	Casinghead Gas Con	densate	
If change of ownership give name			
and address of previous owner			
DESCRIPTION OF WELL AND	DIFACE		
Lease Name	Well No. Pool	Name, Including Formation	Kind of Lease
Jicarilla A-55	6	Ballard PC	State, Federal or Fee
Location			
Unit Letter	90 Feet From The South	Line and 790 Feet From	n The tiest
J. (10)			
Line of Section 26	Township 23N Range	, NMPM,	Sandoval County
Name of Authorized Transporter of C			roved copy of this form is to be sent)
If well produces oil or liquids,	Unit Sec. Twp. Rge.		Vhen
give location of tanks.		No	
If this production is commingled	with that from any other lease or po-	ol, give commingling order number:	
COMPLETION DATA	Cil Well Gas Well		Plug Back Same Res'v. Diff. Res
Designate Type of Comple		X	
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
12/14/68	2/5/69	30791	
Pool	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
Ballard	PC	29501	2963*
Perforations	·		Depth Casing Shoe
29481-29601		AND CONTINUE DECORD	
		AND CEMENTING RECORD DEPTH SET	SACKS CEMENT
HOLE SIZE	CASING & TUBING SIZE	100*	100
6 3/4"	<u> </u>	30501	100
	11*	29631	
. TEST DATA AND REQUEST	FOR ALLOWABLE (Test must b	be after recovery of total volume of load o	il and must be equal to or exceed top all
OIL WELL	dote for this	s depth or be for full 24 hours) Producing Method (Flow, pump, gas	Title etc.)
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas	RELIVE
	Tubing Pressure	Casing Pressure	Choke Siz
Length of Test	I doing Flessme	July 1 1002 = 1	APR 1 8 1969
Actual Prod. During Test	Oil-Bbis.	Water - Bbls.	Gas-MCF
			OIL CON. COM
			DIST. 3
GAS WELL			
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
2455	3 Hrs.	0	Choke Size
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	3/4 THC
Choke Test	502	502	
I. CERTIFICATE OF COMPLIA	ANCE	OIL CONSER	VATION COMMISSION
		APPROVED	APR 1 8 1969
Commission have been complied	nd regulations of the Oil Conservati d with and that the information giv	ven	v Emery C Arnold
above is true and complete to	the best of my knowledge and beli	ef. By Olighian Signed by	SUPERVISOR DIST. #
		#	DOI DIVATOON DESCRIPTION

4/18/69

(Date)

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 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