· [	NO. OF CC1.ES BISCIVED 4			
ţ	DISTRIBLTION		ONSERVATION COMMISSION	Form C-104
ŀ	FILE /	REQUEST I	FOR ALLOWABLE	Supersedes Old C-104 and C-110 Effective 1-1-65
l	U.S.G. <b>S.</b>	AUTHORIZATION TO TRA	- AND NSPORT OIL AND NATURAL GA	AS.
	LAND OFFICE	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		,
Ì	TRANSPORTER CAS /		· •	: ;
	GAS /		: •	* ·
I.	PRORATION OFFICE			
	DAVE M. THOMAS. JF	₹ <u>.</u>		
	Ad iress			
	P.O. Box 2026, Farmington, New Mexico 87401  Other (Please explain)			
	Reason(s) for filing (Check proper box)  New Well	Change in Transporter of:	Other (Please explain)	
ļ	Recompletion	Oil Dry Ga	s 🔲	
	Change in Ownership	Casinghead Gas Conden	sate	
	If change of ownership give name			
	and address of previous owner			
Ħ.	DESCRIPTION OF WELL AND L	EASE   Well No.   Pool Name, Including Fo	ormation Kind of Lease	Jicarilla Contrac
	Chacon Jicarilla	7 Ballard Pict		Jicarilla Contrac
	Location			
	Unit Letter 0; 119	PO Feet From The South Lin	e and 1850 Feet From Th	Bast
	Line of Section 23 Tow	nship 23N Range	3W , NMPM, Sand	doval county
	Line of Section			
111.	DESIGNATION OF TRANSPORT  Name of Authorized Transporter of Oil	Or Condensate	Address (Give address to which approve	ed copy of this form is to be sent)
	None			
	Name of Authorized Transporter of Cas		Address (Give address to which approve	
	El Faso Natural Ga	RS Company Tunit   Sec.   Twp.   Rge.	P.O. Box 990, Farmir	
	If well produces oil or liquids, give location of tanks.	i i i i i	NO	Unknown
	If this production is commingled with that from any other lease or pool, give commingling order number:			
IV.	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back   Same Restv. Diff. Restv.
	Designate Type of Completio	1 1 A	<u> </u>	
	Date Spudded	Date Compl. Ready to Prod.	Total Depth 3310 *	р.в.т. <b>д.</b> 3249 <b>'</b>
	li-17-77 Elevations (DF, RKB, RT, GR, etc.)	5-20-77 Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
	7468 KB	Pictured Cliffs	3193	3199'
	Perforations 31.93'-3200'. 3203	3'-3206', 3210'-3214	ŧ	Derth Casing Shoe
	TUBING, CASING, AND CEMENTING RECORD			
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET 1 31 °	sacks cement 125 sxs
	12 <del>z</del> 7-7/8	8-5/8" #출"	33931	175 sxs
	1 17 0			
V.	TEST DATA AND REQUEST FO	OR ALLOWABLE (Test must be a able for this d	ifter recovery of total volume of load oil a epith 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
	_e.iq.ii or 1001			
	Actual Prod. During Test	Cil-351s.	Water-Bbis.	Gas-MOR
	GAS WELL Flowing Pr	ress., Tbg 108 ps	ig Csg 425 psig	I Committee of Contraction
2/4	Actual Prod. Test-MCF/D 1-1,434,CACF-2,040	Length of Test 3 hrs	Bbls, Condensate/MMCF	Gravity of Condensate  -C-
74	Testing Method (pitot, back pr.)		Cosing Pressure (Shut-in)	Choke Size
	Eack Fressure	755 psig	770 psig	3/4"
VI	I. CERTIFICATE OF COMPLIANCE		OIL CONSERVA	TION 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. For: Dave M. Thomas, Jr.		APPROVED 19 ORIGINAL S.O. LOS Y & C. MARRIELL, JR	
			TITLE PETROLEUM ENGINEUP DIGM. NO. 3	
			This form is to be filled in compliance with RULE 1104.	
-	Twell Ul Color (Signature)		or this is a remosal for allowable for a newly drilled or despend	
			well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.  Attractions of this form must be filled out completely for all.	
	Ewell N. Walsh, P.			
	Walsh Engr. & Frod. Corp.		sole on new and recompleted wells.  Fill out only Sections I. II. III. and VI for changes of comer.	
	(D	cie)	well name or number, or transporter, or other such of lage of condition.  Separate Forms C-104 must be filed for each pool in multiply	
	7 me 14, 1977	7	Separate Forma C-104 must open paration Ma.	Committee and the control of the second cont