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	DISTRIBUTION SANTA FE FILE	1	CONSERVATION COMMISSION FOR ALLOWABLE AND	Form C-104 Supersedes Old C-104 an Elfective 1-1-65
	U.S.G.S.	AUTHORIZATION TO TRA	ANSPORT OIL AND NATURAL	
	TRANSPORTER OIL			
	OPERATOR GAS	1		
1.	PRORATION OFFICE	-		
	Chace Oil Company, Inc.			
	Address			
	313 Washington, S.E., Albuquerque, NM 87108 Recson(s) for filing (Check proper box) Other (Please explain)			
	New Well Change in Transporter of:			
	Recompletion OII Dry Gos Pool Change			
	Change in Ownership Casinghead Gos Condensate			
	If change of ownership give name and address of previous owner			
11.	DESCRIPTION OF WELL AND LEASE Lease Name Well No., Pool Name, Including Formation Kind of Lease Lease			
	Chace Apache 15	3 West Lindrith	· ·	al or Fee Indian 15
		85C		
	Unit Letter : 1805 Feet From The West Line and 1850 Feet From The North			
	Line of Section 20 To	wnship 23N Range	3W , NMPM, Sandov	val co
н.	DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS			
	Name of Authorized Transporter of Oil (X) or Condensate (Address (Give address to which approved copy of this form is to be sent)			
	Name of Authorized Transporter of Cosinghead Gas (A) or Dry Gas (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			
	If well produces oil or liquids, give location of tanks. Unit Sec. Twp. Page. Is gas actually connected? When F 20 23N 3W Yes 6/26/78			
,,,	•	th that from any other lease or pool,	give commingling order number:	
i¥.	Designate Type of Completion	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. 1
	Designate Type of Completity	Date Compl. Ready to Prod.	Total Depth	P.B.7:D.
	8/2/77	12/16/82	7525'	7459'
	Elevations (DF, RKB, RT, GR, etc.) 7257 GR	Name of Producing Formation Gallup-Dakota	Top 01/Gas Pay 6052	Tubing Depth 72801
	,	215', Tocito: 6759'-6876'	The state of the s	Depth Cosing Shoe
	Dakota 'A': 7106'-7132', Dakota 'B': 7148-		3-7224'	7519'
	HOLE SIZE	TUBING, CASING, AND	DEPTH SET	SACKS CEMENT
		\		
V.	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 able for this depth or be for full 24 hours)			
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas li	fi, eic.)
	Length of Test	Tubing Pressure	Costing Pressupp @ E TVE	Clake Size
			DEGELVE	W
	Actual Pred. During Test	Oil-Bbls.	JUN 2 1 1984	Ga - MCF
•	CON DIV.			
1	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensette/Assen ST. 3	Gravity of Condensate
			0.0	
	Testing Method (pitat, back pr.)	Tubing Pressure (Shut-in)	Cosing Pressure (Shut-in)	Choke Size
VI.	CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION	
	I hereby certify that the rules and regulations of the Oil Conservation		APPROVED JUN	2 1, 1984
	I hereby certify that the rules and r Commission have been complied w above is true and complete to the	ith and that the information given		
	and complete to the	The war my knowledge and penel.	SUPERVISOR DISTRICT # 3	
			TITLE	V DISTRIPL SE 3

President

June 18, 1984

(Tirle)

(Date)

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepwell, this form must be accompanied by a tabulation of the deviatests taken on the well in accordance with RULE 111.

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

Fill out only Sections I. II. III, and VI for changes of owell name or number, or transporter, or other such change of condi-

Separate Forms C-104 must be filed for each pool in multimpleted wells.