40.	OF COPIES RECE	IVED	L		
	DISTRIBUTION				
SANT	SANTA FE FILE				
FILE					
13.5.0	IJ.\$.G.\$.				
LAN	LAND OFFICE				
	NSPORTER	OIL	Ī		
'^^	IRANSPORTER				
OPE	OPERATOR				
PRO	PRORATION OFFICE				
	Operator				

## NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE

Form C-104
Supersedes Old C-104 and C-110

	FILE U.S.G.S. LAND OFFICE	AND  AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS						
	I RANSPORTER OIL GAS OPERATOR							
ı.	PRORATION OFFICE		API #30	-043-206	87			
	PARKO INC.							
	Acdress P.O. Box 75 Counse	P.O. Box 75 Counselor, New Mexico 87018						
	Reason(s) for filing (Check proper box)							
	New Well Fitecompletion	Change in Transporter of: Oil X Dry Gas						
	If change of ownership give name and address of previous owner	S.I.O. CO.	401 S. Bost	on Suite	Tulsa 2310 OK 74103			
H.	DESCRIPTION OF WELL AND L	EASE   Well No.   Pool Name, Including For	rmation.	Kind of Lense	Lease No.			
	Luase Name LULU	4 Lybrook Ga		1	or Fee Federal NM28741			
	Location		. •					
	Unit Letter P : 900	Feet From The FSL Line	and 990	Feet From T	he <u>FEI</u> ,			
	Line of Section 29 Town	nship 23N Range	6W , NMFN	4 Sando	Val County			
III.	DESIGNATION OF TRANSPORT	ER OF OIL AND NATURAL GAS	5		ed copy of this form is to be sent)			
	Name of Authorized Transporter of Ott	X or Condensate	Farmington					
	Name of Authorized Transporter of Cas	Ingherd Gas or Dry Gas	Address (Give address	to which approv	ed copy of this form is to be sent)			
	PAKKO INC.	Unit   Sec.   Twp.   Rge.	Farmington					
	If well produces oil or liquids, g ve location of tanks.	P 29 23N 6W NO						
If this production is commingled with that from any other lease or pool, give commingling order number:								
17.	Designate Trans of Completion	Oil Well Gas Well	New Well Workover	Deepen	Plug Back   Same Resty. Diff. Resty.			
	Designate Type of Completio	Date Compl. Ready to Prod.	Total Depth		P.B.T.D.			
				,				
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oll/Gas Pay		Tubing Depth			
	F'erforations	erforations			Depth Casing Shoe			
	TUBING, CASING, AND		CEMENTING RECORD					
	HOLE SIZE	CASING & TUBING SIZE	DEPTH		SACKS CEMENT			
v	. IEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a	fter recovery of total vo	lume of load oil	and must be equal to or exceed top allow-			
	OII, WELL Date First New Oil Run To Tanks	able for this de	pth or be for full 24 hos	(FE)	It Lee E I V E I			
	Date First Hear Cit Num 10 Tunks	Date of 1880	Froducting Mathies (1)	M				
	Length of Test	Tubing Pressure	Casing Pressure		JUN 2'9 1990			
	Actual Prod. During Test	Oil-Bbls.	Water - Bble.	C	DIECON, DIV			
					DIST. 3			
	GAS WELL							
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MN	ICF	Gravity of Condensate			
	Testing Method (pitot, back pr.)	Tubing Presewe (Shut-in)	Casing Pressure (Sh	ut-in)	Choke Size			
VI	L. C'ERTIFICATE OF COMPLIAN	CE	OIL	CONSERV	ATION COMMISSION			
			11					
	I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given		APPROVED JUL 9. 1990 , 19					
	above is true and complete to the	bove is true and complete to the best of my knowledge and belief.		BY Buch Chang				
	;7	SUPERVISOR DISTRICT #5 This form is to be filed in compliance with RULE 1104.						
	Jagge M. M. C. (Sign	If this is a r	This form is to be filed in compliance with RULE 1104.  If this is a request for allowable for a newly drilled or deepened					
	(Sign	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.						
	Vice President							
	June 25-1990	ate)	Fill out only Sections I. II. III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.					
	ען	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.						