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SANTA FE	NEW MEXICO OIL	CONSERVATION COMMISSION	Form C-104 Supersedes Old C-104 and C-1
FILE	REQUEST	FOR ALLOWABLE AND	Effective 1-1-65
U.S.G.S.	AUTHORIZATION TO TR	INDUTAR DIA TO TOO SIAN	CAS
LAND OFFICE	AUTHORIZATION TO TR	INLAND CORP	ORATION PURCHASED ALL THE ASS
TRANSPORTED OIL		OF BOTH LaM	AR TRUCKING, INC. AND INLAND C
TRANSPORTER GAS /		INC. THIS PUR	CHASE INCLUDED N. M. S. C. C.
OPERATOR /		Permit # 670	WHICH HAS DEEN TRANSFERRED T
PRORATION OFFICE		INLAND CORP	ORATION.
Petroleum Consult	ants, Inc.		CLYDE C. LAMAR, PRESI INLAND CORPORATION
	, S.E., Albuquerque,		
Reason(s) for filing (Check proper be New Well Recompletion Change in Ownership	Change in Transporter of:	name from Va	hange of Corporation l R. Reese & Assoc., roleum Consultants,
If change of ownership give name and address of previous owner			
DESCRIPTION OF WELL ANI			Kind of Lease
Lease Name Mesa (S		mame, Including Formation  scrito Gallup	State, Federal or Fee <b>Federal</b>
Location			
Unit Letter <b>I</b> ; <b>2</b>	140 Feet From The South L	ine and 1000 Feet Fro	om The <b>East</b>
Line of Section 25	ownship 24N Range 7	W , NMPM, Rio	Arriba
Line of Section 25 T	ownship 24N Range 7	, NMPM, ME	County
	DEED OF OUR AND MARKINAL C	LAG.	
Name of Authorized Transporter of C	RTER OF OIL AND NATURAL G	Address (Give address to which an	proved copy of this form is to be sent)
Lamar Trucking, I		Box 1528, Farming	ton, N.M.
	<del></del>	Address (Give address to which approved copy of this form is to be sent)	
Name of Authorized Transporter of Casinghead Gas X or Dry Gas Southern Union Gas Company		208 E. Apache, Farmington, N.M.	
	Unit Sec. Twp. Rge.		When
If well produces oil or liquids, give location of tanks.	I 25 24N 7W	yes	7-1-61
If this production is commingled to COMPLETION DATA	with that from any other lease or pool	i, give comminging order number:	
	Oil Well Gas Well	New Well Workover Deepen	Plug Back   Same Res'v. Diff. Res'
Designate Type of Complete	xion - (X)	1	1 1
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Elevations (DF, RKB, RT, GR, etc.,	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
		<u> </u>	
Perforations			Depth Casing Shoe
	TUBING, CASING, AI	ND CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
TEST DATA AND REQUEST	FOR ALLOWABLE (Test must be	after recovery of total volume of load : depth or be for full 24 hours)	oil and must be equal to or exceed top all
OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas	s lift, etc.)
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
			OCT 1 8 1965
			00110
GAS WELL			OIL CON. COM.
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
. CERTIFICATE OF COMPLIA	NCE	OIL CONSER	VATION COMMISSION
		OCT 1	8, 1965
I hereby certify that the rules an	d regulations of the Oil Conservation	APPROVED	8 1965, C. Annual 19
above is true and complete to	l with and that the information give the best of my knowledge and belief	BY	
	- <del>-</del>	Superior Die	L#3
5 % %			
COST CONTROL OF COST COST COST COST COST COST COST COST			in compliance with RULE 1104.
		If this is a request for al	lowable for a newly drilled or deeper npanied by a tabulation of the deviat
·	gnature)	well, this form must be accome tests taken on the well in accome.	spanied by a tabulation of the deviation contains with RULE 111.
Vice President		11	

(Title)

(Date)

Vice President

10-11-65

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

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