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LAND OFFICE			
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TRANSFORTER	GAS	/	<u> </u>
OPERATOR		1	
PRORATION OFFICE			<u> </u>
Operator			

1.	SANTA FE  FILE  U.S.G.S.  LAND OFFICE  I RANSPORTER  OPERATOR  PRORATION OFFICE  Operator  Dyna Ray 011 & Ga  Address  A101 R. Louisians	REQUEST F	DISERVATION COMMISSION FOR ALLOWABLE AND NSPORT OIL AND NATURAL	Form C-10# Supersedes Old C-104 and C-110 Effective 1-1-65 GAS		
	Reason(s) for filing (Check proper box)  New We!!  Recompletion  Change in Ownership  If change of ownership give name and address of previous owner  DESCRIPTION OF WELL AND I	Change in Transporter of: Oil Dry Gas Casinghead Gas Condens  Irving Pasternak, dba St	Other (Please explain) sate  nar-Alan Oil Co., 4101 Denve	r, Colorado 80222		
	Wasson-Federal	1 So. Blanco Pic	ctured Cliffs XXX Feder	al %xxxx NM 03453-C		
	3,	mship <b>24N</b> Range	₩, NMPM,	The <b>Rast</b> Rio Arriba County		
III.	DESIGNATION OF TRANSPORT  Name of Authorized Transporter of Oil	rer of oil and natural ga	S Address (Give address to which appro	oved copy of this form is to be sent)		
			Yes	1		
IV.	Designate Type of Completion		New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.		
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	Р.В.Т.Ф.		
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth		
	Perforations			Depth Casing Shoe		
		TUBING, CASING, AND				
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS GEMENT		
		OR ALLOWARD E. (Tour must be	for recovery of total volume of land of	il and must be equal to or exceed top allow-		
V.	TEST DATA AND REQUEST FOOL WELL	able for this de	pth or be for full 24 hours)			
	Date First New Oil Run To Tanks Date of Test		Producing Method (Flow, pump, gas	10/11 6061/		
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size		
	Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	Gas-MCF		
	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate		
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size		
VI.	CERTIFICATE OF COMPLIAN		OIL CONSERVATION COMMISSION MAR 1 0 1969			
	C house been complied t	regulations of the Oil Conservation with and that the information given best of my knowledge and belief.	APPROVED  By Original Signed by Emery C. Arnold  SUPERVISOR DIST. #3  This form is to be filed in compliance with RULE 1104.  If this is a request for allowable for a newly drilled or despendently this form must be accompanied by a tabulation of the deviation			

above	is true and con	mplete to the peat of my knowledge	, una bonio.
	May	/// 1112×	
	41/	11/1/3	
	Manager	(Signature)	
		(Title)	
		(Date)	

well, this form must be accompanied by a tabulation of 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 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.