

NO. OF COPIES RECEIVED	5
DISTRIBUTION	
SANTA FE	/
FILE	/
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL / GAS /
OPERATOR	/
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

Operator RENCO, INC.	
Address 809 First National Bank Bldg., EAST - Albuquerque, New Mexico 87108	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input checked="" type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
5228 Redondo Avenue	
If change of ownership give name and address of previous owner Killarney Oil Company - Oakland, California 94618	

II. DESCRIPTION OF WELL AND LEASE

Lease Name Renco-Killarney	Well No. 1	Pool Name, Including Formation Devil's Fork	Kind of Lease State, Federal or Fee Federal	Lease No. SF080202
Location				
Unit Letter J ; 1000 Feet From The South Line and 1000 Feet From The East				
Line of Section 24 Township 34 North Range 7 West , NMPM, Rio Arriba County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Plateau, Inc.	Address (Give address to which approved copy of this form is to be sent) P.O.Box 108-Farmington, New Mexico 87401			
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Southern Union Gas Company	Address (Give address to which approved copy of this form is to be sent) Fidelity Union Tower Bldg.-Dallas, Texas			
If well produces oil or liquids, give location of tanks.	Unit J	Sec. 24	Twp. 24N	Rge. 7W
	Is gas actually connected? Yes		When 1958	

If this production is commingled with that from any other lease or pool, give commingling order number: None

V. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		X						
Date Spudded 8-4-58	Date Compl. Ready to Prod. 8-25-58		Total Depth 5023'		P.B.T.D. Same			
Elevations (DF, RKB, RT, GR, etc.) 6652 GL	Name of Producing Formation Gallup		Top Oil/Gas Pay 5246'		Tubing Depth 5515'			
Perforations 5246' to 5520'					Depth Casing Shoe 5616'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
	8-5/8"		235'		125			
	8-1/2"		5605.79'		150			
	8-3/8"		5515'		-			

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth 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
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D 243 MCF	Length of Test 24 hours	Bbls. Condensate/MMCF 7	Gravity of Condensate 41
Testing Method (pitot, back pr.) Pitot	Tubing Pressure (shut-in) 800 lbs.	Casing Pressure (shut-in) 300 lbs.	Choke Size 3/4

VI. CERTIFICATE OF COMPLIANCE

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.

Noel Reynolds

Noel Reynolds
(Signature)

Operator

(Title)

November 7, 1967

(Date)

OIL CONSERVATION COMMISSION

APPROVED NOV 8 1967, 19

Original Signed by Emery C. Arnold

SUPERVISOR DIST. #3

TITLE

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

If this is a request for allowable for a newly drilled or deepened 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.

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.