NO. OF COPIES RECEIVED		6	
DISTRIBUTION			
SANTA FE			
FILE		1	,
U.S.G.S.			
LAND OFFICE			<u> </u>
TRANSPORTER	OIL		
	GAS	1	
OPERATOR		2	<u> </u>
PRORATION OFFICE		1	<u> </u>
6	-		

DISTRIBUTION SANTA FE FILE U.S.G.S. LAND OFFICE	REQUEST F	REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS		
TRANSPORTER OIL GAS / OPERATOR PRORATION OFFICE Operator				
Cotton Petrole	um Corporation			
	treet, Suite 2502, I	Denver, Colorado 80	203	
Reason(s) for filing (Check proper box New We!1) Change in Transporter of:	Other (Please explain)		
Recompletion	Oil Dry Gas	F-5		
Change in Ownership X If change of ownership give name	Casinghead Gas Condens Manning Gas & Oil Con	npany, 1660 Lincoln	Street, Suite 2502,	
and address of previous owner		Denver, Colo	orado ouzus	
DESCRIPTION OF WELL AND Lease Name Apache	Well No. Pool Name, including For	rmation Kind of Lease Lup-Dakota W State, Federa	Jicarilla Lease No.	
Location				
Unit Letter;	Feet From The North Line			
Line of Section 2 To	wnship 24N Range	4W , NMPM, Ric	Arriba County	
. DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL GAS	S Address (Give address to which appro	ved copy of this form is to be sent)	
Permian Corpor	ration	P. O. Box 1702. Farm	nington. N.M. 87401	
Name of Authorized Transporter of Ca El Paso Natura		P.O. Box 990, Farmi		
If well produces oil or liquids,	Unit Sec. Twp. P.ge.	Is gas actually connected? Wh		
give location of tanks.	ith that from any other lease or pool,	give commingling order number:		
COMPLETION DATA Designate Type of Completi	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.	
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	
Perforations			Depth Casing Shoe	
	TUBING, CASING, AND	CEMENTING RECORD		
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
V. TEST DATA AND REQUEST I	FOR ALLOWABLE (Test must be a	fter recovery of total volume of load oil pth or be for full 24 hours)	and must be equal to or exceed top allow-	
OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas l	ift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
	Oil-Bbls.	Water - Bbls.	Gas-MCF	
Actual Prod. During Test	Oil-Bala.		<u> L</u>	
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 COMPLIA	NCE	OIL CONSERV	ATION COMMISSION	
		APPROVED	, 19	
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.		BY_Original Signed by A. R. Kendrick		
For: Cotton Petrol	Leum Corp.	TITLE SUPERVISOR DI		
Twell !!	10 An O. O.	This form is to be filed in compliance with RULE 1104.		
- Con West	anature)	well, this form must be accomp tests taken on the well in acc	owable for a newly drilled or deepend canied by a tabulation of the deviation ordance with RULE 111.	
Ewell N. Walsh, P.E., President (Title) All sections of this form must be filled out completely sble on new and recompleted wells.			nust be filled out completely for allow	

Walsh Engineering & Prod. Corp. (Date) August 11, 1977

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 only.