## DISTRIBUTION ı.

II.

II.

v.

VI.

(Dute)

SANTA FE		17		NEW MEXICO C			TION COMMI LOWABLE	SSION		orm C-104 speraedes Old	C-104 and C-1
FILE		1		. KLWO!	LJ1	AND	LOWADLL			llective 1-1-6	
U.S.G.S.				AUTHORIZATION TO	TRA		OIL AND N	ATURAL (	SAS		
LAND OFFICE	·······	<u> </u>						-			
IRANSPORTER	GAS	-	<del> </del>				•				•
OPERATOR		2									
PRORATION OF	ICE									<del></del>	<del> </del>
Operator	D - 4	. 1	C				,				
Address	retro	rec	ım C	Corporation			<u> </u>				
717 - 17	7th: \$1	tree	⊵t,	Suite 2200, Denver, C	Co10	rado 8	0202		····		
Reason(s) for filing	(Check p	roper	box			İ	Other (Please	explain)			
New Well	H			Change in Transporter of: Oil X D	Dry Gas	, nl					
Recomplétion Change in Ownership				——————————————————————————————————————	Conden	<b>=</b> 1					
	Sia alu										
If change of owners and address of prev							· · · · · · · · · · · · · · · · · · ·				
DESCRIPTION O	F WEL	L A	ND I	LEASE							
Lease Name	<u>•</u>	<del></del>		Well No. Pool Name, Includi			1.	Kind of Lease	170	arilla	Lease No.
Apache				103   Lindrith-G	àallı	up Dako	ta West	State, Federa	Ap	ache	127
Location · [	)	. 2	2000	Feet From The North	1 104	and 89	5	_Feet From 1	rhe Wes	t	
Unit Letter		;		Peet From The		, u	<u>. Y</u>			<del></del>	
Line of Section	3		Tow	mship 24 North Range	, ,	4 West	, NMPM,	Rio Arr	<u>iba</u>		County
DECICNATION O	to TDA	NCD	റജന	ER OF OIL AND NATURAL	E. GA!	s					
Name of Authorized	Transpor	ter o	011	or Condensate		Address (	Give address 10	which approv	ed copy of i	this form is to	be sent)
Permian Corporation						P. O. Box 1702, Farming Address (Give address to which approv			ton, New Mexico 87401		
Name of Authorized	Transpor	rter of	Casi	inghead Gas or Dry Gas	'	Address (	sive adaress to	шиск арргот	eu copy of i	inis join is to	ve sem,
** 11 11 11	aa Manidi			Unit Sec. Twp. P.ge	e.	ls gas act	ually connected	17 Whe	rn		
If well produces oil give location of tank		-,	1	D   3   24 N 4	1 W			<u> </u>			
If this production is COMPLETION D.		ngled	i with	h that from any other lease or p					Plug Back	Same Hasi	v. Diff. Res'v
Designate Typ	e of C	ompl	etion	n - (X)   Oil Woll   Gas We	611	Now Well	Workover	Deepen 1	l I	J I	i i i i i i i i i i i i i i i i i i i
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		
			ا (۵۰	Name of Producting Formation							
Perforations	<del>`</del>		1			<u></u>	•		Depth Cas	ing Shoe	
				TUDING CASING	4 110	CEHENT	INC DECORD		1		
HOLE	SIZE		· ·	TUBING, CASING,		CEMENT	DEPTH SE			ACKS CEM	ËNT
110000											
									<u> </u>		
									<del> </del>		
TEST DATA ANI	REQU	JEST	FO				of total volun		and must be	equal to or ex	ceed top aliou
OIL WELL				able for th	its dep		Method (Flow,		i, eic.)		
Date First New Oil F	4un 10 1	ang s		Date of 1eer		, , , , , , , , , , , , , , , , , , , ,	1			A.J. III	
Length of Test				Tubing Pressure		Casing Pr	essure		Chocostiz	<b>LIMES</b>	
			01 011		Water - Bbl	4.		d. Vind			
Actual Prod. During Toot				Oil-Bbls.		nate: - Bale.			Gravit of Condensate  Choke Size		
<u> </u>									10	CON	3
GAS WELL				a A A Maria		Bhle Con	ienegte/MMCF		Graythol	Condensate	/
Actual Prod. Test-k	ACF/D		l	Length of Test	1	DDIB. COIR	181.8 C(8) KW.C (				
Testing Method (pitot, back pr.)				Tubing Pressure (Shut-iu)		Casing Pressure (Shut-in)		Choke Size			
							04.6	211650144	TION CO	MANAGON	
CERTIFICATE O	F COM	PLI	ANC	E			OIL C	JNSERVA	: 1070	MMISSION	
hereby cortify the	t the rul	les a	nd re	egulations of the Oil Conservat	tion		VED	57 J	19:0		
Commission have t	ten co	melie	ed wi	ith and that the information gives beat of my knowledge and beli	iven		Original				
POOLS IN CIRC WING	2 2 mgr 1 6 t		.,, -					SUPPRIME	: तत्त्रकारण <b>य</b>	4 3	· · · · · · · · · · · · · · · · · · ·
					.						
D. E. Wood /x			102)		10.4	a form is to l	at for allow	able for a	nowly dillle	d or despansi	
		(1)	ignat	iwe) ·		mall th	In form rout !	he accompe	nied by a t	#parama or	CHO COALPITO
Division Production Manager						tests taken on the well in accordance with RULE 111.  All sections of this form must be filled out completely for allow					
Decembe	r 3.		(Tid 9	•)		eble on	nove and reco	mplated vie	114.		
Secumbe	,	,	-		- 11	1, 11	" come access to the			much channe	of condition

Fill out only Sections I. B. III, and VI for changes of owner, well name or number, or transporter or other such change of condition.