				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
	NO OF COPIES RECEIVED			And the state of t		
	DISTRIBUTION	NEW MEXICO OIL CO	ONSERVATION COMMISSION	Form C-104		
	SANTA FE	i _	FOR ALLOWABLE	Supersedes Old C-104 and C-110		
	FILE		AND	Effective 1-1-65		
	U.S.G.S.	AUTHORIZATION TO TRA	NSPORT OIL AND NATURAL G	AS		
	LAND OFFICE					
İ	TRANSPORTER GAS					
- }	OPERATOR 2		AP!	30-039-21840		
	PRORATION OFFICE					
1.	Operator	<u> </u>				
	Causes C					
	Address					
	P.O. Kink	cilit & Janton 9	Marie Michiga	58240		
	Reason(s) for filing (Check proper box)		Other (Please explain)	322.5		
	New Well	Change in Transporter of:	_			
	Recompletion	Oil Dry Gas				
	Change in Ownership	Casinghead Gas Conden	sate			
•	If change of ownership give name					
	and address of previous owner					
11	DESCRIPTION OF WELL AND	I FASE		CONTRACT		
41.	Lease Name	, Well No. Pool Name, Including Fo	ormation Kind of Lease	Lease No.		
	AXI assoclo N	15-19 Talance Y	State, Federal	cr Fee   /2/		
	Location	1		, , , ,		
	Unit Letter 0 ; 99	Peet From The Jouth Line	e and 1650 Feet From T	to the total		
	Unit Letter;	Peet From The July Eme	e dad / loo E reet rom 1	ne <u>Ca</u>		
	Line of Section // Tov	vnship $25N$ Range	4W, NMPM, The	arriba County		
	<u></u>					
111.	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA				
	Name of Authorized Transporter of Cil	or Condensate	Aidress (Give address to which approv	ed copy of this form is to be sent)		
			!			
	Name of Authorized Transporter of Cas	singhedd Gas or Dry Gas	Address (Give address to which approv	ed copy of this form is to be sent)		
	Dai Company	of The mexico	planas Tex	a		
	If well produces oil or quids,	Onit Sec. Twp. Rge.	Is gas actually connected? Whe	n 0 1 70		
	give location of tanks.		YES	8-1-19		
	If this production is commingled with	th that from any other lease or pool,	give commingling order number:	•		
IV.	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back   Same Resty. Diff. Resty.		
	Designate Type of Completic		New Well Workdver Beepen	Flag Back Same ites v. Bill. ites v.		
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
	5-7-79	7-25-79	6400	62/7'		
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tuhing Denth		
	(30 11241	Victured Cliffs	3740	3765'		
	Perforations			Depth Casing Shoe		
	3745 -	3790' (1107)	rline)	6362'		
			CEMENTING RECORD			
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
	12 14 -	95/8"	256'	285		
	8 3/4.	17"	/ 4/303'	415		
	614"	4/2" LINER	4256 - 6362'	375		
		SEE REVERSE SIDE FO	OR TUBING RECORD -			
V.	TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allow-					
	OIL WELL Date First New Oil Run To Tanks	Date of Test	pth or be for full 24 hours) Producing Method (Flow, pump, gas lif			
	Date First New Oil Run 10 lanks	Date of lest	Producing Method (1-100, pamp, gas 15)	TOTAL STATE		
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size		
	Length of Test	Tabling Floorage	Salang , ressal	MITTIELD		
	Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF ALIG 71979		
				HOU VI		
	l	.L	<u> </u>	OIL CON. COM.		
	GAS WELL			DIST. 3		
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate		
	1777	3 Downs				
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size 3/4/11		
	8, P.	842	842	77		
VI.	CERTIFICATE OF COMPLIAN	CE	OIL CONSERVA	TION COMMISSION		
	•					
	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.		,	, 19		
			Original Signe			
				· ·		
			TITLESUGES			
			This form is to be filed in compliance with RULE 1104.			
	Bur D. See		To this is a sequent for allow	vable for a newly drilled or deepened nied by a tabulation of the deviation		

(Title)

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.

HOLE SIZE	CASING FTUBING SIZE		SACKS CEMENT
	<del></del>	5886'	JACKY CENTER
	23/8"	3765'	