1	DISTRIBLT IC	 >N			
-	SANTA FE				
1	FILE				
Ì	U.S.G.S.		<u> </u>		
1	LAND OFFICE		<u> </u>	 	
	TRANSPORTER	OIL	<u> </u>	ļ	
		GAS	<u> </u>	<u> </u>	
	OPERATOR		↓	↓	
1.	PRORATION OFFICE			<u> </u>	

NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE

Form C-104 Supersedes Old C-104 ms

S	ANTAFE	REQUEST F		Effective 1-1-65
	ILE		AND	ς.
	J.S.G.S.	AUTHORIZATION TO TRAN	SPORT OIL AND NATURAL GA	
Ŀ	AND OFFICE			
Γ,	RANSPORTER OIL			
	GAS			
•	DPERATOR		,	
• •	PRORATION OFFICE		/	
C	operator The			
L	Chace Oil Company, Inc.			
_ / ^	313 Washington SE, Albuq	uerque. NM 87108	/	
L	313 Washington SE, Fired		Other (Please explain)	
	reason(s) for filing (Check proper box)	Change in Transporter of:	İ	
- 1	%e= ₩e!1	Oil X Dry Gas		
1	Recompletion.	Cosinghed Gas Condens	me	
- [Change in Ownership	Cosming		
14	change of ownership give name		_	
- 41	nd address of previous owner			
	•			
II. <u>I</u>	DESCRIPTION OF WELL AND I	Well No.: Pool Name, Including Fo	rmation Kind of Lease	Leas
İ	Lesse Name	11 S. Lindrith Ga		or Fee Indian 70
L	Jicarilla 70	11 0. 22.		
- 1	Lecesion K 185	Feet From The West Line	1850 Feet From T	ne south
-	Unii Leiler K : 185	Feet From TheLine		
	34 Ion		4W , NMPM, Ri	o Arriba co
L	Line of Section 34 Tow	mahir Zair Hange		_
		CER OF OUL AND NATURAL GA	S	
u. j	NEER of Authorized Transporter of Oil	CER OF OIL AND NATURAL GA	Address (Give address to which approx	ed copy of this form is to be sent
		_	P. O. Box 1429, Bloomfie	ld, NM 87413
i	CONOCO, Inc.	inchead Gas [V] or Dry Gas	Address (Give address to which approv	ces copy of this join to be control
i			P. O. Box 1492, El Paso,	TX 79978
l	El Paso Natural Gas Com	Unit Sec. Twp. P.ge.	Is gas actually connected? Whe	en .
- 1	If well produces oil or liquids,	K 34 24N 4W		
1	give location of tanks.	1 3 2 2	-incommingling order number:	
1	If this production is commingled wi	th that from any other lease or pool,	Sive comminging order	2 2 2 2 2 2
IV.	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res*r. Diff.
	Designate Type of Completic	on = (X)		<u> </u>
	Denignate app	1		P.B.T.D.
		Date Compl. Ready to Prod.	Total Depth	
	Dene Spudded	Date Compl. Ready to Prod.	Total Depth	
	Dene Spudded	Date Compl. Ready to Prod.	Total Depth Top Oll/Gas Pay	Tubing Depth
		Date Compl. Ready to Prod. Name of Producing Formation		Tubing Depth
	Dens Spudded Elevations (DF, RKB, RT, GR, etc.)	Date Compl. Ready to Prod.		
	Dene Spudded	Date Compl. Ready to Prod. Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
	Dens Spudded Elevations (DF, RKB, RT, GR, etc.)	Date Compl. Ready to Prod. Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth Depth Casing Shoe
	Date Spudded Elevations (DF, RKB, RT, GR, etc.) Feriorations	Date Compl. Ready to Prod. Name of Producing Formation TUBING, CASING, AN		Tubing Depth
	Dens Spudded Elevations (DF, RKB, RT, GR, etc.)	Date Compl. Ready to Prod. Name of Producing Formation	Top 011/Gas Pay	Tubing Depth Depth Casing Shoe
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Vice President Production (Title) March 21, 1988

(Date)

All sections of this form must be filled out completely able on new and recompleted wells.

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

Separate Forms C-104 must be filed for each pool 1