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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

INLAND CORPORATION PURCHASED ALL THE ASSETS
OF BOTH LEASE TRUCKING, INC. AND INLAND CRUDE,
INC. THIS PURCHASE OCCURRED IN 1964.
PERMIT # 670 WHICH WAS BELONGED TO
INLAND CORPORATION.

Operator		CLYDE C. LEMAR, PRESIDENT INLAND CORPORATION
Address		Consolidated Oil & Gas Inc. P.O. Box 2038, Farmington, New Mexico
Reason(s) for filing (Check proper box)		INLAND CORPORATION PURCHASED ALL THE ASSETS OF BOTH LEASE TRUCKING, INC. AND INLAND CRUDE, INC. THIS PURCHASE OCCURRED IN 1964. PERMIT # 670 WHICH WAS BELONGED TO INLAND CORPORATION.
New Well	Change in Transporter of:	
Recompletion	Oil	
Change in Ownership	Casinghead Gas	
	Dry Gas	
	Condensate	X

If change of ownership give name and address of previous owner

Lease Name		Well No.	Pool Name, including Formation	Kind of Lease
Tribal #6		5	Blanco Mesaverde	Federal
Location		Unit Letter M ; 990 Feet From The South Line and 790 Feet From The West		
Line of Section 5		Township 26 North	Range 3 West	NMPM, Rio Arriba County

Name of Authorized Transporter of Oil or Condensate		Address (Give address to which approved copy of this form is to be sent)	
Lease Trucking Company		P.O. Box 1528, Farmington, New Mexico	
Name of Authorized Transporter of Casinghead Gas or Dry Gas		Address (Give address to which approved copy of this form is to be sent)	
El Paso Natural Gas Co			
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.
	M	5	26 N 3 W
			Yes

Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Rest'v.	Diff. Rest'v.
Date Spud led	Date Compl. Ready to Prod.	Total Depth		F.B.T.D.					
Pool	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 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 - Bbls.
GAS WELL			
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gas of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size

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.	

Clyde Phillips
(Signature)

Production Foreman
(Title)

10-18-65
(Date)

OIL CONSERVATION COMMISSION	
APPROVED	OCT 21 1965
BY	Original Signed Emery C. Arnold
TITLE	Supervisor Dist. # 2

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 Sections I, II, III, and VI only 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 multiple completed wells.