NO. OF COPIES	NO. OF COPIES RECEIVED			
DISTRIB	UTIC	DN	Ī	
SANTA FE			1	
FILE		1	0	
U.S.G.S.				
LAND OFFICE				
IRANSPORTER	FR	OIL	1	
		GAS		
OPERATOR		2		
PRORATION	OFF	ICE		

	7		
NO. OF COPIES RECEIVED 5			
DISTRIBUTION	NEW MEXICO OIL CO	DNSERVATION COMMISSION	Form C-104
SANTA FE /	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-11 Effective 1-1-65
FILE	!	AND	Elicetive F 1-05
U.S.G.S.	AUTHORIZATION TO TRA	NSPORT OIL AND NATURAL GAS	
IRANSPORTER OIL 1			
GAS			
OPERATOR 2			
PRORATION OFFICE Operator			
	TIN-GREER DRILLING C	ORP.	
Address 221 Patrolau	m Center Building. P	armington, New Mexico	
Reason(s) for filing (Check proper box,		Other (Please explain)	
New Well	Change in Transporter of:		
itecompletion.	Oil Dry Ga:	Change in Oper	rator
Change it. Ownership	Casinghead Gas Conden	sate	
If change of ownership give name and address of previous owner	R. L. Bayless. Box	1541, Farmington, New	Mex1co
I. DESCRIPTION OF WELL AND	•		
Lease Name	Well No. Pool Nan		d of Lease
BERNIE	1	Puerto Chiquito Mancox:	e, Federal or Fee FOUCTAL
Location Unit Letter H ; 14	50 Feet From The north Line	e and 430 Feet From The	east
			8
Line of Section 6 , Tov	vnship 26N Range	1E , NMPM, Rio	Arriba County
I. DESIGNATION OF TRANSPORT	FER OF OUL AND NATURAL GA	S	
Name of Authorized Transporter of Oil		Address (Give address to which approved co	ppy of this form is to be sent)
Shell Oil Compar	Ŋ	Box 1588, Farmington	, New Mexico
Name of Authorized Transporter of Cas	singhead Gas or Dry Gas	Address (Give address to which approved co	ppy of this form is to be sent)
Nor			
If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected? When	
give location of tanks.	H 6 26N 1E	No	
	th that from any other lease or pool,	give commingling order number:	
7. COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen Plu	g Back Same Restv. Diff. Restv.
Designate Type of Completic	on = (X)		
Date Spudded	Date Compl. Ready to Prod.	Total Depth P.E	B.T.D.
Freel	Name of Producing Formation	Top Oil/Gas Pay Tuk	oing Depth
Perforations		Der	oth Casing Shoe
Perforations			3 44 mg 3 m3 m
	TUBING, CASING, AND	CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
V. TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a) able for this de	fter recovery of total volume of load oil and m pth or be for full 24 hours)	ust be equal to or exceed top allow
OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc	.)
	1		
Length of Test	Tubing Pressure	Casing Pressure Cha	oke Size
	I uping Plessure		
	I dibing Plessure		
Actual Prod. During Test	Oil-Bbls.	Water-Bbls. Gas	s÷ MCF
Actual Prod. During Test		Water-Bbls. Gas	s-MCF
		Water-Bbls. Gas	s-MGF
GAS WELL	Oil-Bbls.	<i>U</i>	
		Water-Bbls. Gas Bbls. Condensate/MMCF Gro	wity of Condensate
GAS WELL Actual Prod. Test-MCF/D	Oil-Bbls.	<i>U</i>	
GAS WELL	Oil-Bbls. Length of Test	Bbls. Condensate/MMCF Gra	
GAS WELL Actual Frod. Test-MCF/D Testing Method (pitot, back pr.)	Oil-Bbls. Length of Test Tubing Pressure	Bbls. Condensate/MMCF Gra	wity of Condensate
GAS WELL Actual Prod. Test-MCF/D	Oil-Bbls. Length of Test Tubing Pressure	Bbls. Condensate/MMCF Gra	wity of Condensate Ske Size N COMMISSION
GAS WELL Actual Frod. Test-MCF/D Testing Method (pitot, back pr.)	Oil-Bbls. Length of Test Tubing Pressure	Bbls. Condensate/MMCF Gro	vity of Condensate Characteristics N COMMISSION 1966
GAS WELL Actual Prod. Test-MCF/D Testing Method (pitot, back pr.) T. CERTIFICATE OF COMPLIAN I hereby certify that the rules and Commission have been complied to	CE regulations of the Oil Conservation with and that the information given	Bbls. Condensate/MMCF Gro	vity of Condensate Characteristics N COMMISSION 1966
GAS WELL Actual Prod. Test-MCF/D Testing Method (pitot, back pr.) T. CERTIFICATE OF COMPLIAN I hereby certify that the rules and Commission have been complied to	Oil-Bbls. Length of Test Tubing Pressure CE regulations of the Oil Conservation	Bbls. Condensate/MMCF Gra Casing Pressure OIL CONSERVATIO	N COMMISSION 1966 , 19 mery C. Arnold

VI.

Engineer
(Title)
October 13, 1966

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 multiply completed wells.