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LAND OFFICE		
TRANSPORTER	OIL	/
	GAS	/
OPERATOR		/
PRORATION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS  
INLAND CORPORATION PURCHASED ALL THE ASSETS  
OF BOTH LaMAR TRUCKING, INC. AND INLAND  
INC. THIS PURCHASE INCLUDED N. M. S. C.  
PERMIT # 670 WHICH HAS BEEN TRANSFERRED  
INLAND CORPORATION.

Operator		CLYDE C. LaMAR, President INLAND CORPORATION	
Consolidated Oil & Gas Inc.			
Address			
P.O. Box 2038, Farmington, New Mexico			
Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well	<input type="checkbox"/>	Change in Transporter of:	
Recompletion	<input type="checkbox"/>	Oil	<input type="checkbox"/>
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>
		Dry Gas	<input type="checkbox"/>
		Condensate	<input checked="" type="checkbox"/>

If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease
Hoyt	3	Blanco Mesaverte	State, Federal or Fee Federal
Location			
Unit Letter	E	1830 Feet From The North Line and 1150 Feet From The West	
Line of Section	5	Township 26 North Range 4 West	NMPM, Rio Arriba County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
La Mar Trucking Company	P.O. Box 1528, Farmington, New Mexico
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
El Paso Natural Gas	
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
	E 5 26 N 4 W Yes

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.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 - MCF

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity 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. # 3

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.

THE NATIONAL BUREAU OF INVESTIGATION  
WASHINGTON, D. C. 20535  
JANUARY 10, 1964  
MEMORANDUM FOR THE DIRECTOR  
SUBJECT: [Illegible]

On January 8, 1964, [Illegible] advised that [Illegible] had been contacted by [Illegible] who stated that [Illegible] was planning to travel to [Illegible] on January 10, 1964. [Illegible] stated that [Illegible] was planning to travel to [Illegible] on January 10, 1964. [Illegible] stated that [Illegible] was planning to travel to [Illegible] on January 10, 1964.

On January 9, 1964, [Illegible] advised that [Illegible] had been contacted by [Illegible] who stated that [Illegible] was planning to travel to [Illegible] on January 10, 1964. [Illegible] stated that [Illegible] was planning to travel to [Illegible] on January 10, 1964. [Illegible] stated that [Illegible] was planning to travel to [Illegible] on January 10, 1964.

On January 10, 1964, [Illegible] advised that [Illegible] had been contacted by [Illegible] who stated that [Illegible] was planning to travel to [Illegible] on January 10, 1964. [Illegible] stated that [Illegible] was planning to travel to [Illegible] on January 10, 1964. [Illegible] stated that [Illegible] was planning to travel to [Illegible] on January 10, 1964.

On January 11, 1964, [Illegible] advised that [Illegible] had been contacted by [Illegible] who stated that [Illegible] was planning to travel to [Illegible] on January 11, 1964. [Illegible] stated that [Illegible] was planning to travel to [Illegible] on January 11, 1964. [Illegible] stated that [Illegible] was planning to travel to [Illegible] on January 11, 1964.