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## 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 TRANSPORTINOIN PARION PLANSED ALL THE ASSETS CF BOTH LAMAR TRUCKING, INC. AND INLAND CRUDE, INC. THIS PURCHASE INCLUDED N.  $\mathbb{M}_{+}$  S. C. . PERMIT # 670 WHICH HAS LELIN TRANSFERRED TO INLAND CORPORATION. CLYDE C. LOMAR, PRESIDENT Operator INLAND CORPORATION El Paso Products Company Address Post Office Box 1560, Farmington, New Mexico 87401 Other (Please explain) Change in Company Name: Reason(s) for filing (Check proper box) New Well Change in Transporter of: El Paso Natural Gas Products Company to Dry Gas Oil Recompletion EL PASO PRODUCTS COMPANY Casinghead Gas Condensate Change in Ownership If change of ownership give name DESCRIPTION OF WELL AND LEASE Kind of Lease Well No. Pool Name, Including Formation State, Federal or Fee Basin Dakota Federal N.C.R.A. Location 790 Feet From The North Line and \_\_\_ 890 \_\_ Feet From The \_\_\_East Unit Letter Rio Arriba 7W 3 26N Range , NMPM, County Township Line of Section DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Oil or Condensate X P. O. Box 1528, Farmington, New Mexico 87401
Address (Give address to which approved copy of this form is to be sent) La Mar Trucking, Inc. Name of Authorized Transporter of Casinghead Gas \_\_\_\_ or Dry Gas X P. O. Box 990, Farmington, New Mexico 87401 El Paso Natural Gas Company Is gas actually connected? Unit Rge. If well produces oil or liquids, give location of tanks. 26N : 7W 6-29-60 3 Yes If this production is commingled with that from any other lease or pool, give commingling order numbers **COMPLETION DATA** Plug Back | Same Res'v. Diff. Res'v. Workover Oil Well New Well Deepen Designate Type of Completion - (X) Total Depth P.B.T.D. Date Compl. Ready to Prod. Date Spudded Tubing Depth Top Oil/Gas Pay Name of Producing Formation Pool Depth Casing Shoe Perforations TUBING, CASING, AND CEMENTING RECORD SACKS CEMENT CASING & TUBING SIZE DEPTH SET HOLE SIZE (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) TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL Producing Method (Flow, pump, gas lift, etc.) Date First New Oil Run To Tanks Date of Test Casing Pressure Length of Test Tubing Pressure 1966 Water - Bbls. Actual Prod. During Test Oil - Bhis. MAR 2 OIL CON. CON DIST. 3 **GAS WELL** Bbls. Condensate/MMCF Gravity of Condensate Actual Prod. Test-MCF/D Length of Test Casing Pressure Choke Size Testing Method (pitot, back pr.) Tubing Pressure OIL CONSERVATION COMMISSION . CERTIFICATE OF COMPLIANCE APPROVED MAR 2 1966 I hereby certify that the rules and regulations of the Oil Conservation Original Signed Linery C. Arnels Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief. TITLE Supervisor Dist. # 3 This form is to be filed in compliance with RULE 1104. Original Signed WILLIAM R. SPEER 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.

(Signature)

(Title)

(Date)

Division Manager

March 2, 1966

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: