NO. OF COPIES RECEIVED		1,3	
		<del>  ``</del>	<del>7 -</del>
SANTA FE		1	
FILE		7	1
U.S.G.S.			
LAND OFFICE			1
TRANSPORTER	OIL	17	
INARSFORTER	GAS	1	
OPERATOR			
PROPATION OFFICE		1	T

XERO

DISTRIBUTION SANTA FE /	1 1	NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE		
U.S.G.S.	AUTHORIZATION TO T	AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS		
TRANSPORTER OIL /	+- ,			
OPERATOR	·			
PRORATION OFFICE Operator				
PUBCO PETROLI	EUM CORP.		- · · · · · · · · · · · · · · · · · · ·	
Post Office 1	Box P, Aztec, New Mexico			
Reason(s) for filing (Check prop.	er box)  Change in Transporter of:	Other (Please explain)		
Recompletion Change in Ownership	Oil Dry Casinghead Gas Con	Gas densate		
If change of ownership give no and address of previous owner	ame			
DESCRIPTION OF WELL				
Lease Name Federal	Well No. Pool Name, Including	NOTAGE End		
Location	12   Basin Dal	KOUS.	<u> </u>	
Unit Letter C;	790 Feet From The North 1	ine and 1450 Feet From	m The West	
Line of Section 23	Township 26 North Range	6 West , NMPM,	San Juan County	
DESIGNATION OF TRANS	PORTER OF OIL AND NATURAL (	GAS		
Name of Authorized Transporter		Address (Give address to which app Post Office Box 108	roved copy of this form is to be sent)	
Plateau, Incorr 'Name of Authorized Transporter	of Casinghead Gas or Dry Gas XX		roved copy of this form is to be sent)	
El Paso Natural	Gas Company	Post Office Box 990 Is gas actually connected?		
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. C 23 26 6	Yes	When March 31, 1966	
	ed with that from any other lease or poo	ol, give commingling order number:		
COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back   Same Restv. Diff. Restv.	
Designate Type of Comp	<u> </u>			
11-13-65	Date Compl. Ready to Prod.	Total Depth 7624	P.B.T.D. 7608	
Elevations (DF, RKB, RT, GR, e	12-31-65 Ptc.; Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
6760 Gr.	Dakota.	7360	7325 Depth Casing Shoe	
•	52, 7496-7520, 2 jest/ft.		7614	
	TUBING, CASING, A	ND CEMENTING RECORD	,	
HOLE SIZE	CASING & TUBING SIZE 9 5/8"	DEPTH SET	SACKS CEMENT	
7 7/8"	4 1/2"	7614		
	2 3/8"	7325		
TEST DATA AND REQUES	ST FOR ALLOWABLE (Test must be	after recovery of total volume of load of depth or be for full 24 hours)	il and must be equal to or exceed top allow-	
OII. WELL  Date First New Oil Run To Tank		Producing Method (Flow, pump, gas	lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
			CLEIVED	
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	3,066	
	m + 3 0 //		Glavity of Commission 3 Choke Stee	
GAS WELL Date of Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Ghavity of Conseningto 3	
3,009	3 hours		012-0151.	
Testing Method (pitot, back pr.)  Back Pressure	Tubing Pressure (Shut-in) 2786	Casing Pressure (Shut-in) 2778	3/4"	
CERTIFICATE OF COMPL		OIL CONSERV	ATION COMMISSION	
	A section of the OH Comments	APPROVED APR 1 8 196	6	
Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.  Supervisor plant mea				
		SUDEDMEOD	·	
	1 .		-10	
Show O Phode		This form is to be filed in compliance with RULE 1104.  If this is a request for allowable for a newly drilled or despend		
	(Signature) well, this form must be accompanied by a tabulation tests taken on the well in accordance with RULE 11		canied by a tabulation of the deviation	
Field Foreman  (Title)  April 18 1966  Fill out only		- All sections of this form to	nust be filled out completely for allow-	
		able on new and recompleted t	wells. II. III. and VI for changes of owner,	
	(Date)	well name or number, or transpo	orter, or other such change of condition. ust be filed for each pool in multiply	
_	_	Separate Forms C-104 mu completed wells.	ier on mind for each boot in municiply	

XERO

XERO