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	DISTRIBUTION  NEW MEXICO OIL CONSERVATION COMMISSION  FORM C-104				
	REQUEST FOR ALLOWABLE Supersedes Old C-104 and			Form C-104 Supersedes Old C-104 and C-110	
	U.S.G.S.	FILE AND 65			
	LAND OFFICE AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS				
	TRANSPORTER OIL /				
	OPERATOR 4	OPERATOR  PROPATION OFFICE  Decidor			
1.	PRORATION OFFICE OIL CON. COM				
		UIST. 3			
	Address	Western Oil & Minerals Corp.			
	Reason(s) for filing (Check proper ha	101 Petroleum Center Bldg. Farmington, New Mexico 87401  on(s) for filing (Check proper box)  Other (Please explain)			
	New Well	Change in Transporter of:	Other (Please explain)		
Recompletion Oil Dry Gas Change in Ownership Casinghead Gas Condensate					
	If change of ownership give name and address of previous owner				
II.	I. DESCRIPTION OF WELL AND LEASE				
	Lease Name Well No. Pool Name, Including Formation Kind of Lease Fee & Feder				
	Sinclair  Location  Unit Letter A ; 790 Feet From The N Line and 790 Feet From The E  Line of Section 17 Township 25 N Range 7 W , NMPM, Rio Arriba Country				
***	•			TITUA COUNTY	
111.	Name of Authorized Transporter of Of	TTER OF OIL AND NATURAL GA	Address (Give address to which appro	ved copy of this form is to be sent)	
	El Paso Natural C	las Company	Box 990 Farmin Address (Give address to which appro	gton, New Mexico	
	Name of Authorized Transporter of Casinghead Gas or Dry Gas X El Paso Natural Gas Company		Box 990 Farmington, New Mexico		
	If well produces oil or liquids,	Unit Sec. Twp. Ege.	Is gas actually connected? Wh		
			No	Approx. 3 months	
	If this production is commingled with COMPLETION DATA	ith that from any other lease or pool,			
	Designate Type of Completi	on = (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.	
	6-16-68	7-8-68	2267	2210	
	Elevations (DF, RKB, RT, GR, etc.) 6400 KB	Name of Producing Formation Pictured Cliffs	Top Oil/Gas Pay	Tubing Depth	
	Perforations		<u> </u>	Depth Casing Shoe	
	2150-55 and 61-64 TUBING, CASING, AND		CEMENTING DECORD	2241	
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
	12 1	8 5/8	104	80	
	6 3/4	4 2	2241	100	
V.	TEST DATA AND REQUEST FOIL WELL	OR ALLOWABLE (Test must be a able for this de	fter recovery of total volume of load oil : pth or be for full 24 hours)	and must be equal to or exceed top allow-	
	Date First New Oil Run To Tanks	/AZ WAJZJAJ		Producing Method (Flow, pump, gas lift, etc.)	
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
	Feudiu di Tesi	Tubing Pressure	Cdaing Pressure	Choke Size	
	Actual Prod. During Test	Oil - Bbls.	Water-Bbls.	Gas-MCF	
	AS WELL				
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
ŀ	2700 MCF Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
	Pitot	620 guage	620 guage	1 "	
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.  Original signed by Jack A. Cole  (Signature)  President  (Title)  July 12, 1968		OIL CONSERVATION COMMISSION		
			Original Signed by Emery C. Arnold  BY  SUPERVISOR DIST. #5  TITLE  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 only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.  Separate Forms C-104 must be filled for each pool in multiply		
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		· ·	completed wells.		