1.	DISTRIBUTION  SANTA FE  FILE  U.S.G.S.  LAND OFFICE  I RANSPORTER  OPERATOR  PRORATION OFFICE	REQUEST F	ONSERVATION COMMISSION FOR ALLOWABLE AND NSPORT OIL AND NATURAL	Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65  GAS  MAY 1 1969
	JIL CORPORATION  Address:  JIL CORPORATION  OIL CON. COM.  DIST. 3			
	Reason(s) for filing (Check proper box) tiew Well tenompletion Clange in Cwnership		<del>-</del>	
	If change of ownership give name and address of previous owner			
II.	DESCRIPTION OF WELL AND I	LEASE Well No. Pool Nan	ne, Including Formation	Kind of Lease
	JICARIKLA "D"	13 GAVII	AN-PICTURED CLIFFS	State, Federal or Fee INDIAN
	Unit Letter "C"; 1650 Feet From The UEST Line and 990 Feet From The NORTH			
	Line of Section 14 , Township 26.1 Range 35 , NMPM, RTO ARRINA County			
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS				
111.	Hame of Authorized Transporter of Oil	or Condensate	Address (Give address to which app	proved copy of this form is to be sent)
	Name of Authorized Transporter of Cas	inghead Gas or Dry Gas	Address (Give address to which app	proved copy of this form is to be sent)
	FL PASO NATURAL GAS COMPANY well produces oil or liquids, live location of tanks.		BOX 990 FARMINGTON, NEW MEXICO	
	f this production is commingled with that from any other lease or pool, give commingling order number:			
IV. COMPLETION DATA Oil Well Gas Well New Well Workover Deepen Plug Back Sam				
	Designate Type of Completio	M = M =	X Total Depth	P.B.T.D.
	12-15-68	4-27-69	3867'	37391
	Fool	Name of Producing Formation PICTURED CLIFFS	Top Oil/Gas Pay  3680'	Tubing Depth
	GR 7174' RKB 7187'			Depth Casing Shoe
	3680'-86', 3695'-3702', 3713'-16', 3720'-30',		3740'-50'. D CEMENTING RECORD	2631
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
	g"	7"	2631	100 Sacks
	64"	31/2"	3866'	100 sacks
			for a second sec	oil and must be equal to or exceed ton allow-
V.	OIL WELL	able for this de	epth or be for full 24 nours)	oil and must be equal to or exceed top allow-
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, ga.	s 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
	1946 (CAOF) 4-27-69 Testing Method (pitot, back pr.)	3 hours Tubing Pressure	None Casing Pressure	Choke Size
*1*	PROVER OF COMPLIAN	768#	783# OU CONSER	VATION COMMISSION
V1.	SERTIFICATE OF COMPLIANCE		APPROVED	
	Commission have been complied to	regulations of the Oil Conservation with and that the information given		
	above is true and complete to the	e best of my knowledge and belief.	BY Original Signed by Emery C. Arnold	
			TITLE	SUPERVISOR DIST, #99
	10/1	Fair	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.	
		R. A. FAIR		
	(T)	itle)		
	APRIL 29, 1969 (D)	ate)		

Separate Forms C-104 must be filed for each pool in multiply completed wells.