NO. OF COPIES RE	ECEIVED	i	}			
DISTRIBUT	TON	13		AL CONTRACTOR		
SANTA FE	/	1	NEW MEX	EQUEST		
FILE		1 4	1	K	EWUEST	AN
U.S.G.S.	·		ALITH	IORIZATION	TO TR	
LAND OFFICE			1	OKIZATION	I IO IKA	11131
TRANSPORTER	OIL					
IMANSPORTER	GAS	f'				
OPERATOR			1			
PROPATION OF	FFICE					
Operator						
	neco Oi	1 Com	pany			
Address						
Suit	<u>:e 1200</u>	Linco	oln Tower	Bldg., I	enver,	Co]
Reason(s) for filin	g (Check p ▼	roper box,		-		
New Well	음			in Transporter		
Recompletion			Oil	님	Dry Ga	
Change in Owners	nip[Casingh	ead Gas	Conder	nsate
If change of owne and address of pr	evious ow	ner	· DAGE	· · · · · · · · · · · · · · · · · · ·	_ iv ,	, .
Lease Name	OF WEL	LAND	Well No	. Pool Name,	Including F	ormati
Hans	on.		2	Ba	sin Dak	ota
Location	· · · · · · · · · · · · · · · · · · ·		-		<u> </u>	.
Unit Letter	T,	. 14	50 Feet Fi	om The SO	nth in	e and
J		·			<u> </u>	.c unu
Line of Section	6	Tow	vnship 251	<u> </u>	Range	10W
DESIGNATION						
Name of Authorize	d Transpor	ter of Oil	Or or	Condensate 🗶	X.	Add
Thriftwa						20
Name of Authorize	d Transpor	ter of Cas	ingh s ad Gas [or Dry-G	as	Add
Not Ded:	<u>icated</u>		·			ļ
If well produces of		s,	Unit Se		P.ge.	Isg
give location of ta	nks.	 	L	6 25	10	
If this production		ngled wit	h that from a	my other leas	e or pool,	give
COMPLETION	DATA			Oil Well To	Gas Well	New
Designate T	ype of C	ompletio		OT 4611 . (1 -
Date Spudded			1	Ready to Prod.	X	1 75.
1 -	_		t			Toto
12/16/73 Elevations (DF, R)	<u>}</u> ¥₽ ₽₹ ≎	D	Name of De	22/74		-
		K, etc.j	1		nr.	Тор
6488.01	GR		l Da	ıkota		<u></u>
•	/= ~1					
61901	<u>- 6194</u>	+' , 620	03 ' - 622	O' TUBING, CA	F1516 4 4 4 7 -	
	- C1-7-7	 				CE
12-1	ZSIZE		CASIN	8-5/8"	SIZE	
12-1	:/4 :/8"	····		0 - 5/0 5-1/2"		 -
7-7	<u>/o.</u>			5-1/2"	·	
			<u> </u>		 	
			L			<u></u>
TEST DATA AN	ID REQU	JEST FO	OR ALLOWA	ABLE (Test	t must be a) for this de	
OIL WELL Date First New Oil	I Run To T	'anks	Date of Test		,	Pro
				•		18
Length of Test			Tubing Press	lure		Cal
					/	
Actual Prod, Durin	g Test		Oil-Bhla.	· · · · · · · · · · · · · · · · · · ·		Ware
.,o,uai riou, Durin	g . 44.				Į	, ,.
			L			\ 0 1
GAS WELL						1
Actual Prod. Test	-MCF/D		Length of Ta	at		Bbla
000			-			
900 Testing Method (pr	itot, back t		Tubing Press	24 hrs.	<u> </u>	Casi
	war ance b	~··/	. antild blass	~~ - (DUME-TU	•	Cust
Back P				60		
	r		19	60		
CERTIFICATE		PLIANC	· · · · · · · · · · · · · · · · · · ·	60		
		PLIANC	· · · · · · · · · · · · · · · · · · ·	60		AF

ERVATION COMMISSION

SANTA FE		1	ļ.,	REQUEST FOR ALLOWABLE						Supersedes Old C-104 and C-11				
U.S.G.S.		-	6	AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL G							Effective 1-1-65	•		
LAND OFFICE		 	 	AUTH	JRIZATIO	NIOIRA	anspor i	OIL AND	NATURAL	GAS				
TRANSPORTER	OIL	1										•		
OPERATOR	GAS	_	-											
PROPATION OF	FICE	 -	1											
Operator		1	1	L								· · · · · · · · · · · · · · · · · · ·		
Tenne	eco Oi	1 (Comp	any										
Suite	e 1200) Li	inco	ln Tower	Bldg	Denver.	Colora	nens of	2		ð			
Reason(s) for filing	(Check p	rope	r box)			<u> </u>		Other (Please						
New Well	Ä				n Transporter									
Recompletion Change in Ownershi				Oil Casinghe	ond Gas	Dry Go Conde								
			· · · · · · · · · · · · · · · · · · ·											
If change of owners and address of pre-						··· b								
DESCRIPTION O	F WEL	LA	ND I	LEASE							SF 08	7272		
Lease Name	·				Pool Name,	Including F	ormation		Kind of Lea	Se	61. 00.	Lease No.		
Hanso Hanso	n			2	Be	asin Dak	cota		State, Fede	ral or Fee	Federal			
Unit Letter	L	. ;	145	0 Feet Fro	om The Sc	outh Lir	ie and	800	Feet From	The Wes	st			
Line of Section	6		Tow	nship 25N		Range	1.0W	, NMPM		0	_			
				p		Trange	10%	, Idial-ia	<u>,</u>	Sar	Juan	County		
DESIGNATION O	F TRA	NSF	ORT of Oil	ER OF OIL	AND NAT			ive address	o which appr	oved copy	of this form is to	he sent)		
Thriftwa							!				w Mexico	· •		
	Name of Authorized Transporter of Casinghead Gas or Dry Gas						Address (ive address	o which appr	oved copy	of this form is to	be sent)		
Not Dedic	cated			Unit Sec	T	19	1		10 11					
If well produces oil give location of tank		s,	. 1	,	. ¦Twp. 6 ¦ 25	P.ge.		ally connecte	eay w	hen Tron T	edication			
If this production is	s commi	nole	d with	· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·	No No		number:	opon t	edication	1		
COMPLETION D		g.c				Gas Well	·			15. 5	. 10			
Designate Type	pe of C	omp	letion		i weii	7.5	New Well	Workover	Deepen I	Plug B	ack 'Same Hes'	v. Diff. Res'v.		
Date Spudded				Date Compl. F	Ready to Proc	X .	Total Dept	h		P.B.T.	D.	i		
12/16/73 Elevations (DF, RK)					22/74			63701			63261			
		R. et	c.j	Name of Produ		ion	Top Oil/G	as Pay		Tubing	Depth			
Perforations	488.0' GR Dakota					<u></u>	FT		Depth (6079¹ Depth Casing Shoe				
6190'	- 6194	ł •	620	31 - 6220	o '									
						SING, AND	CEMENT	NG RECOR	D					
12-1/					8-5/8"	SIZE		628'	T	200	SACKS CEMI			
7-7/					0- 5/0 5 - 1/2"		 	6370 '			sx Cl "A"			
	<u></u>		-		<u> </u>						"A" latex.	: 175 sx 2% lowden A" latex. Stg 2:		
									400 sx	2% lo	wdense + 5	0 sx Cl		
TEST DATA ANI	D REQI	JES'	T FO	R ALLOWA	BLE (Te:	st must be a	fter recovery	of total volu	me of load oi	land must	be equal to or ex	neat.		
OIL WELL Date First New Oil	Run To T	'ank s	,	Date of Test		2 70, 11111 20	Production	to hod For	, pump, gas	lift, etc.)		····		
							10		1					
Length of Test				Tubing Pressu	ire		Casing Pri	Saure		Choke	Size			
Actual Prod, During	Test			Oil-Bbia.	<u> </u>		Water-Bbi	- 672 - 1		Gas - M	CF			
							عمر معالما	<u> </u>	<u>, /</u>					
							VIL O.	911 S	1					
GAS WELL	MCF/D			Length of Tes	it		Bbls. Cond	ensate ANAX	······································	Gravity	of Condensate			
900					24 hrs.				-					
Testing Method (pitc				Tubing Pressu	-	1)	Casing Pre	osue (Shut	-in)	Choke	Size			
Back Pr			IANC	196 F	.0			2075	ONSERV	ATION	COMMISSION			
CERTIFICATE C														
I hereby certify the Commission have							11	VED	FEB 6			9		
above is true and							BY	riginal	Signed	by Emer	y C. Arnole	1		
					•	İ	TITLE	Si	PERVISO	R DIST	#3	· · · · · · · · · · · · · · · · · · ·		
					This form is to be filed in compliance with RULE 1104.									
_ Vem	James W. Mroles						If this is a request for allowable for a newly drilled or deepened							
	(Signature)						well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.							
<u>Producti</u>	on Cl	erk	(Titl	e)			All	sections of new and re-	this form m	ust be fil	led out complet	ely for allow-		
2/1/7L			,	•			l Fin	out only 5	ections I.	II. III. er	d VI for chang	res of owner.		
-//-IT			(Dat	e)			well nar	ne or number	, or transpo	rten or oth	er such change	of condition.		
						ļ	11				•			