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SANTA FE	1	
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U.S.G.S.	Ĺ	
LAND OFFICE		
TRANSPORTER GAS		
OPERATOR	3	
PRORATION OFFICE		
Croretor		

DISTRIBUTION SANTA FE / FILE /		NSERVATION COMMISSION OR ALLOWABLE AND Form C-104 Supersedes Old C-104 and C-116 Effective 1-1-65		
U.S.G.S. LAND OFFICE TRANSPORTER OIL GAS OPERATOR 3	AUTHORIZATION TO TRA	NSPORT OIL AND NATURAL GA	AS	
I. PRORATION OFFICE Cperator	-			
Bl Paso Natural	Ges Company			
Box 990, Farming		TOL COV		
Reason(s) for filing (Check proper bo	Change in Transporter of:	Other (Please explain) Remedial Work		
Recompletion	Cil Dry Gas	1/	etails	
Change in Ownership	Casinghead Gas Conden	sate		
If change of ownership give name and address of previous owner				
II. DESCRIPTION OF WELL AND	LEASE			
L,ease Name	Well No. Pool Nan	ne, Includir.g Formation	Kind of Lease State, Federal or Fee	
Rincon Unit	166 B	asin Dakota	State, reading of ree	
Unit Letter K ; 18	50 Feet From The South Line	e and Feet From T	he West	
Line of Section 32 , To	ownship 27N Range	6W , NMPM, Rio Am	riba County	
III. DESIGNATION OF TRANSPOR	or Condensate	S Address (Give address to which approv	ed copy of this form is to be sent)	
Name of Authorized Transporter of C	asinghead Gas or Dry Gas	Address (Give address to which approv	ed copy of this form is to be sent)	
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge.	Is gas actually connected? When		
If this production is commingled w IV. COMPLETION DATA	with that from any other lease or pool,	give commingling order number:		
Designate Type of Complet	ion — (X) Gas Well	New Well Workover Deepen	Plug Back Same Restv. Diff. Restv.	
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
Trool	Name of Froducing Formation	Top Oil/Gas Fay	Tubing Depth	
Pool	1 1	1		
Perforations	10 Still	2 Lilo	Depth Casing Shoe	
/ nu	TUBING, CASING, AND	CEMENTING RECORD		
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
The state of the s				
V. TEST DATA AND REQUEST	FOR ALLOWABLE (Test must be a	fter recovery of total volume of load oil o	and must be equal to or exceed top allow-	
OIL WELL Date First New Cil Run To Tanks	able for this de	pth or be for full 24 hours) Producing Method (Flow, pump, gas lif	t, etc.)	
			(CT-IVED)	
Length of Test	Tubing Pressure	Casing Fressure	KIULI	
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCE 21 1965	
GAS WELL				
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensato	
Testing Method (pitol, back pr.)	Tubing Pressure	Casing Fressure	Choke Size	
Calculated AOF	2065	318 OIL CONSERVA	3/4" TION COMMISSION	
VI. CERTIFICATE OF COMPLIA			10	
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.		APPROVED JUN 21 1965 , 19		
		BY Original Signed Emery C. Arnold		
		TITLE: Supervisor Dist. # 3		
OR G NAL SIGNED	OR G NAL SIGNED E.S. OBERLY This form is to be filed in compliance with RULE If this is a request for allowable for a newly drille		able for a newly drilled or deepened	
(Signature)		well, this form must be accompartests taken on the well in accor	nied by a tabulation of the deviation	
Petroleum Engine	GIP Title)	All sections of this form must be filled out completely for allowable on new and recompleted wells.		
June 11, 1965		Fill out Sections I, II, III,	and VI only for changes of owner, en or other such change of condition.	

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.

tubing w/80 bbls. Ken-Pac, circulated out 1 bbl of Ken-Pac.

Date well was tested.

Pulled tubing.

2**-88-**65

59-TT-4

59-0T-4