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DISTRIBUTION SANTA FE		NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE		
FILE		REQUEST FOR ALLOWABLE  AND  Supersedes Old C-104 and C-11  Effective 1-1-65		
U.S.G.S.	AUTHORIZATION TO TR	ANSPORT OIL AND NATURAL G	AS	
LAND OFFICE			Q'	
TRANSPORTER GAS	_	INLAND CORPORATION PURC	HASED ALL THE ASSETS	
OPERATOR		OF BOTH LEMAR TRUCKING,	INC. AND INLAND CRU <b>DE,</b>	
I. PRORATION OFFICE Operator		INC. TRIS ! 1 / ASS INCLUD	ED N. M. S. C.	
TENNECO OIL	COMPANY	PERMIT & 6.0 WHICH HAS	EEN TRANSFERRED TO	
Address Box 1714	Durango, Colored		DE C. Lamar, PRESIDENT ND CORPORATION	
Reason(s) for filing (Check proper bo		Other (Please explain)	ND CORPORATION	
Mew Well	Change in Transporter of:			
Recompletion Change in Ownership	Cil X Dry G	as Effective Jun	e 1, 1905	
If change of ownership give name				
and address of previous owner				
II. DESCRIPTION OF WELL AND Lease Name to the second secon	Well No. Pool No.	ame, Including FormationGallegos	Kind of Lease	
Berger W. O. USA		Gallup	State, Federal or Fee	
	Feet From The	ne and Feet From T	he	
Line of Section 14 , To	ownship <b>26N</b> Range	11V , NMPM, Ser	<b>Juan</b> County	
II. DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL G	Address (Give address to which approx	ed copy of this form is to be sent)	
Name of Furnatized Transporter of O	F-   1000   100	Box After	noten, I med	
Name of Authorized Transporter of Co	asinghead Gas or Dry Gas 🛣	Address (Give address to which approv	Copy of this form is to be sent)	
If well projuction is commingled w	Unit Sec. Twp. Rge.  0 14 26 11 ith that from any other lease or pool,	Is gas actually connected? Whe		
V. COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back   Same Res'v. Diff. Res'v.	
Designate Type of Completi	on – (X)		( 1	
Date Spud led	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
Pool	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
1	Ivamo or producing connecton	100000000000000000000000000000000000000		
Perforations	<u> </u>		Depth Casing Shoe	
	TURING CASING AN	D CENENTING DECORD		
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
V. TEST DATA AND REQUEST F OIL WELL		after recovery of total volume of load oil a epth or be for full 24 hours)	nd must be equal to or exceed top allow	
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift	, etc.)	
	T N N D N N N N N N N N N N N N N N N N	Control Property	Choke Size	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
Actual Prod. During Test	Oil-Bb!s.	Water-Bbls.	Gas - MC	
			KLULIYED	
GAS WELL			1444.00.1000	
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate 965	
			VOIL CON, COM.	
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size DIST. 3	
I. CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION		
		APPROVED MAY 2 6 1965	, 19	
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given		Original Signed By		
above is true and complete to the	e best of my knowledge and belief.	BY A. R. KENDRICK		
. ,		TITLE PETROLEUM ENGIN	TITLE PETROLEUM ENGINEER DIST, NO 7	
J. H. Wattins		This form is to be filed in compliance with RULE 1104.		

(Signature)

5-24-65

District Office Supervisor
(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 Sections I, II, III, and VI only for changes of owner, 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.

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