NO. OF COPIES REC	1 4	4			
DISTRIBUTIO	1				
SANTA FE	1				
FILE	1	4			
U.S.G.S.	Ī				
LAND OFFICE		Ī			
TRANSPORTER	OIL				
TRANSFORTER	GAS	1			
OPERATOR	1				
PRORATION OF	Γ'				

1.	SANTA FE FILE U.S.G.S. LAND OFFICE IRANSPORTER OPERATOR PRORATION OFFI Operator Tenne Address	OIL GAS	/ / / il (Comp									Form C-104 Supersedes Old C-104 and C-11 Effective 1-1-65			
	Reason(s) for filing ((New We!l Recompletion				Change i	Change in Transporter of: Oil Dry Gas Casinghead Gas Condense			Other (Please explain) From Permian Effective 9-1-70)			
	If change of ownersh and address of previous			ne	Casinghe	edd Gus	Conde	nsdre [11]		· · ·						
11	DESCRIPTION OF	wer	T AR	ND T	EASE											
***	Description of Well and Lea Lease Name Delhi-Taylor				Well No.	Well No. Pool Name, Including Formation			Kind of Lease State, Federal or Fee			Fede	ral		ю No. 79679	
	Location Unit Letter K		;	16	50 Feet Fro	om The So	uth Li	ne and1	650	Feet From T	he Wes	t				
	Line of Section	17		Towr	ship 26		Range 1	1	, NMPM,	San Ju	an			C	ounty	
111.	DESIGNATION OF Name of Authorized T Caribou Four	ranspor r Cor	ter of ner	1011 ('S,	Inc.	е. Р			Address (Give address to which approved copy P. O. Box 175, Kirtland, N Address (Give address to which approved copy				New Mexico 87417			
	If well produces oil or give location of tanks		· · · · · · · · · · · · · · · · · · ·		Unit Sec	! -	Rge.	Is gas actua	ally connected	? Whe	n					
IV.	If this production is COMPLETION DA	commir	ngled	l with				give commit	ngling order r	iumber:						
	Designate Type		ompl	etion		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Bo	ack San	ne Res'	F .	Res'v.	
	Date Spudded				Date Compl. 1	Ready to Pro	od.	Total Depth	<u> </u>	L	P.B.T.	D		<u>'</u>		
	Elevations (DF, RKB,	PT CI	P		e Name of Prod	ucing Forma	tion	Top Oil/Ga	s Pav		Tubing	Depth				
	Perforations					, .			I				Depth Casing Shoe			
					TUBING C	ASING AN	D CEMENTI	<u> </u>	 -		•					
	HOLE SIZE					CASING & TUBING SIZE			D CEMENTING RECORD DEPTH SET			SACKS CEMENT				
				-				<u> </u>								
v	TEST DATA AND	REGI	EST	FO	R ALLOWA	BLE (T	est must be a	fter recovery	of total volume	of load oil a	nd must	he equal	to or ex	ceed to	p allow-	
••	OIL WELL Date First New Oil Ru				Date of Test	ab		epth or be for	full 24 hours) Method (Flow,						·	
	Length of Test				Tubing Press	ure		Casing Pressure			Choke Size					
	Actual Prod. During T	est			Oil-Bbls.			Water - Bbls	•.		Gas - M	CF	ماندان از ماندان از ماندان			
										. ,		STI U				
	Actual Prod. Test-MCF/D Length of Test							Bbls. Conde	bls. Condensate/MMCF Gray!			DIST. 3				
	Testing Method (pitot,	, back p	or.)		Tubing Press	we (Shut-1	n)	Casing Pres	i-føda) enves	n)	Choke	Siza			•	
VI.	CERTIFICATE OF COMPLIANCE							OIL CONSERVATION COMMISSION SEP 3 1970								
	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.															
(Signature)								This form is to be filed in complice. If this is a request for allowable for well, this form must be accompanied by tests taken on the well in accordance.				or a newly drilled or deepened a tabulation of the deviation				
	Sr. Production Clerk (Tule)						All sections of this form must be filled out completely for allow able on new and recompleted wells.									
8-27-70 (Date)								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. Sense Forms C-104 must be filed for each pool in multiply								