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SANTA FE		ONSERVATION COMMISSION FOR ALLOWABLE	Form C-104 Supersedes Old C-104 and C-1
FILE /	1	AND	Effective 1-1-65
U.S.G.S.	AUTHORIZATION TO TRAI		RATION PURCHASED ALL THE ASSE
LAND OFFICE			R TRUCKING, INC. AND INLAND CR
TRANSPORTER GAS			HASE INCLUDED N. M. S. C VHICH HAS LEEN TRANSFERRED TO
OPERATOR 3		INLAND CORPO	
PRORATION OFFICE		MADE 13	CLYDE C. LaMAR, PRESID
C _L erator	R & G DRILLING CO	MPANY, INC.	INLAND CORPORATION
A Firess	12 WEST 72nd STREE	ET, NEW YORK, N.Y.	10023
Reason(s) for filing (Check proper b)	:)	Other (Please explain)	
tiew Well	Change in Transporter of:		
Recompletion	Casinghead Gas Conden	sate X	
Change in Ownership	Casingheda Gas Conden	Sale	
If change of ownership give name and address of previous owner	••		
DESCRIPTION OF WELL AND	LEASE Well No. Pool Nam	ne, Including Formation	Kind of Lease
Lease Name GRAHAM		LANCO MESA VERDE	State, Federal or Fee FBD .
Location.			
Unit Letter C ; 99	Feet From TheLine	e andFeet From	The
Line of Section 10 , Do	wnship 27% Range 8	W , NMPM, SAB	County
Line of Section 40 , . c	whenth undide	y state org	
	TER OF OIL AND NATURAL GA	S	roved copy of this form is to be sent)
Name of Authorized Transporter of Ci			MINGTON, NEW MEXICO
Name of Authorized Transporter of Co		Address (Give address to which appr	roved copy of this form is to be sent)
EL PASO MATURAL		P.O. BOX 997, FAR	MINGTON, NEW MEXICO
If well produces oil or liquids,	Unit Sec. Twp. Rge.		/hen
give location of tanks.	C 10 27 8W	YES	1-26-60
	ith that from any other lease or pool,	give commingling order number:	
COMPLETION DATA	Oil Well Gas Well	New Well Workover Deeper.	Plug Back Same Res'v. Diff. Res'v
Designate Type of Completi	on – (X)		
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Fool	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
1.001	Admic of Floadshig Formation		
Perforations			Depth Casing Shoe
	_,	DEPTH SET	SACKS CEMENT
HOLE SIZE	CASING & TUBING SIZE	DEFINAL	SACKS GEMENT
	FOR ALLOWABLE (Test must be a	fter recovery of total volume of load o	il and must be equal to or exceed top allo
OIL WELL Date First New Cil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas	lift, etc.)
page I hat new on hair to I since			/RILIVED
Length of Test	Tubing Pressure	Casing Pressure	Chake 12e
			GG-MCFAPR 2 1965
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	OIL COST. ISC.
			DIST, 8
GAS WELL			
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
		Garden Brown	Chaka Siga
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size
CEDMINICATE OF COMPLIAN	NCE	OIL CONSERV	/ATION COMMISSION
CERTIFICATE OF COMPLIAN	NUE		
I hereby certify that the rules and	regulations of the Oil Conservation	APPROVED APR 2 196	
Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		By Original Signed Emery C. Arnold	
		TITLE Supervisor Dist. # 3	
		This form is to be filed in	n compliance with RULE 1104.
76:-	mature) WILLIAM C. RESE	well, this form must be accom	lowable for a newly drilled or deepens panied by a tabulation of the deviation
(31)		tests taken on the well in acc	cordance with RULE 111.
(Sig	enature) WILLIAM C. RUSSE	tests taken on the well in acc	cordance with RULE 111.
			-vet be filled out completely for alloy

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.

(Title)

NARCE 23, 1965

PRESIDENT