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	HO. OF COPIES RECEIVED			/							
	DISTRIBUTION	NEW MEXICO OIL O	Form C-104								
	SANTA FE		REQUEST FOR ALLOWABLE								
	FILE /		Supersedes Old C-104 and C-11 Effective 1-1-65								
	U.\$.G.\$.	AUTHORIZATION TO TRA	ANSPORT OIL AND NATURAL	GAS							
	LAND OFFICE	The state of the s									
	TRANSPORTER OIL / GAS /										
	OPERATOR /										
1.	PRORATION OFFICE										
	Operator) (1) (1)									
Address & Brooks & C. Mynn											
	Reason(s) for filing (Check proper b	•	Other (Please explain)								
	New Well	Change in Transporter of:	_								
	Recompletion	Otl Dry Go	ıs 🔄								
	Change in Ownership	Casinghead Gas Conde	nsate								
	If change of ownership give name and address of previous owner										
11.	DESCRIPTION OF WELL AND	Well No. Pool Name, Including F									
	Pulton Fed. "R"	1 Basin Dakota	ormation Kind of Lea	20000							
	Location			-							
Unit Letter A : 990 Feet From The North Line and 1170 Feet From The East											
	Line of Section 15 T	ownship 27 - N Range	8-W , NMPM, San	Juan County							
ш	DESIGNATION OF TRANSPO	RTER OF OIL AND NATURAL GA	S								
111.	Name of Authorized Transporter of C	or Condensate		roved copy of this form is to be sent)							
				,							
	Name of Authorized Transporter of C	asinghead Gas or Dry Gas	Address (Give address to which app	rmington, N. M. roved copy of this form is to be sent)							
	El Paso Natural (
	If well produces oil or liquids,	Unit Sec. Twp. Rge.	Box 930 Farmingt Is gas actually connected?	Vhen							
	give location of tanks.	June 4. 1969									
	If this production is commingled	A 15 27-N 8-W with that from any other lease or pool,	Yes								
	COMPLETION DATA										
	Designate Type of Complet	ion - (X)	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.							
	Date Spudded	Date Compi. Ready to Prod.	Total Depth	P.B.T.D.							
		Feb. 5, 1969	6731	6675							
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth							
	5947 GR	Dakota	6514	Depth Casing Shoe							
	6514-6662	THRING CASING AND	CEMENTING RECORD	6724							
ł	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT							
	13 3/8	10 3/4	312	275							
1	9 7/8	7 5/8	2249	350							
	6 3/4	5 3	6724	416							

V. TEST DATA AND REQUEST FOR ALLOWABLE
OIL WELL

(Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pu	Producing Method (Flow, pump, gas lift, etc.)	
Length of Teet	Tubing Pressure	Casing Pressure	Choke Size	
Actual Prod. During Test	Oil-Bbis.	Water - Bbls.	Gas-MCF	

Actual Prod. Test-MCF/D Length of Test Bbls. Condensate/MMCF Gravity of Condensate

834 3 Hours

Testing Method (pitot, back pr.) Tubing Pressure (shut-in) Casing Pressure (shut-in) Choke Size

Back pressure 1031 Facker 3/4" T. C

VI. CERTIFICATE OF COMPLIANCE

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.

dried & Colles					
(Signature) Operations Supervisor					
June 19, 1969					

(Date)

OIL CONSERVATION COMMISSION

APF	PROVED	 	JUV	. 19
BY	Carrie		The service of the	
	4,444	. 15		

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 only Sections I, II, III, and VI 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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