NO. OF COPIES R	RECEIVED	T.	**				1
DISTRIBU	-	, NF	W MEXICO OU C	CONSERVATION COMMISSI	∩N.	Form C-104	
SANTA FE	/	- 175		FOR ALLOWABLE	<b>514</b>	Supersedes Old C	-104 and C-11
FILE	1		NEGOES!	AND		Effective 1-1-65	•
U.S.G.S.		AUTHORIZ	ATION TO TRA	ANSPORT OIL AND NAT	URAL GAS		
LAND OFFICE		AUTHORIZ	-A11011 10 1	1101 011 012 7112	OKAL CAS		
TRANSPORTE	R OIL /						
OPERATOR							
I. PRORATION O	FFICE					<u> </u>	
Operator		_					
	Oil Compa	iny, Inc.					
Address Suite	220 330	)3 Lee Parkw	ay, <u>Da</u> llas	, Texas 75219			
Reason(s) for filir	ng (Check proper l	box )		Other (Please exp	lain)		
New Well		CHAN	Micotter of:				
Recompletion		diar ()	Cyle . Dry Go	as ac			
Change in Owners	ship X	A Carly Mead Gr	Conde	nsate			
II. DESCRIPTION OF WELL AND LEASE Lease Name Federal R							
Lease Name		D LEASE		an boudMesawarde	Kind of	Lease Federal or Fee SF	07847
Lease Name Federa		D LEASE		anooudMesawarde Leta	Kind of	Lease Federal or Fee SF	07847
Federa Location	al R		1 Da	keta	State, 1	Federal or Fee SI	07847
Lease Name Federa	al R			keta	Kind of State, 1	Federal or Fee SI	07847
Federa Location	A ; 9		1 Da	ne and1170F	State, 1	Federal or Fee SI	County
Lease Name Federa Location Unit Letter Line of Section	A ; 9	990 Feet From Th	1 De	Ne and 1170 F 8W , NMPM,	eet From The ea	Federal or Fee SF	County
Lease Name Federa Location Unit Letter Line of Section  I. DESIGNATION Name of Authorize	A , Son 15 , of TRANSPO	990 Feet From Th Township 27N  ORTER OF OIL AN	1 De	Ne and 1170 F  8W , NMPM,  AS  Address (Give address to wheel)	eet From The ear	Federal or Fee SF	County
Lease Name Federa Location Unit Letter Line of Section  I. DESIGNATION Name of Authorize Plateau	A	Peet From The Township 27N  ORTER OF OIL AND OIL OF Conden	1 De north Lir	Ne and 1170 F  8W , NMPM,  AS  Address (Give address to when the Box 180, Farmi	state, j eet From The <u>ea</u> San Juan lich approved copy ngton, New	ederal or Fee SF ast  of this form is to b  W Mexico	County e sent)
Lease Name Federa Location Unit Letter Line of Section  I. DESIGNATION Name of Authorize Plateau Name of Authorize	A SOF TRANSPORMED Transporter of 1, Inc.	Peet From The Township 27N  ORTER OF OIL AND OIL Or Conder	1 De north Lir	Ne and 1170 F  8W , NMPM,  AS  Address (Give address to when the Box 180, Farming add	state, 1 eet From The 66 San Juan lich approved copy ngton, Nev lich approved copy	of this form is to be Mexico of this form is to be	County e sent)
Lease Name Federa Location Unit Letter Line of Section  I. DESIGNATION Name of Authorize Plateau Name of Authorize	A SOF TRANSPORMED Transporter of 1, Inc.	Feet From Th Township 27N  ORTER OF OIL AND OIL Or Conden  Casinghead Gas  Gas Company	1 De north Lingange  D NATURAL GA	Ne and 1170 F  8W , NMPM,  AS  Address (Give address to whe Box 180, Farmily Address (Give address to whe Box 990, Farmily Box 990, Farmily Address (Give address to whe Box 990, Farmily Box 990	state, 1 eet From The	of this form is to be Mexico of this form is to be	County e sent)
Lease Name Federa Location Unit Letter Line of Section  I. DESIGNATION Name of Authorize Plateau Name of Authorize	A ; G  OF TRANSPO  ed Transporter of  Natural  oil or liquids,	Peet From The Township 27N  ORTER OF OIL AND OIL Or Conder	1 De north Lingage  D NATURAL GA	Ne and 1170 F  8W , NMPM,  AS  Address (Give address to when the Box 180, Farming add	state, 1 eet From The 66 San Juan lich approved copy ngton, Nev lich approved copy	of this form is to be Mexico of this form is to be	County e sent)
Lease Name Federa Location Unit Letter Line of Section  I. DESIGNATION Name of Authoriz Plateau Name of Authoriz El Paso if well produces of give location of to	A 1 R  A 15  OF TRANSPO  ed Transporter of 1, Inc.  ed Transporter of 5 Natural oil or liquids, anks.  n is commingled	Feet From Th  Township 27N  ORTER OF OIL AND OIL OR Conden  Casinghead Gas Gas Company Unit Sec.	1 De north Ling Range  D NATURAL GA nasate X or Dry Gas X her lease or pool,	Address (Give address to whe Box 180, Farmi Address (Give address to whe Box 990, Farmi Is gas actually connected?	state, 1 eet From The 6 San Juan sich approved copy ngton, New ich approved copy ngton, New when	of this form is to b  M Mexico of this form is to b  M Mexico	County  e sent)  e sent)
Lease Name Federa Location Unit Letter Line of Section  I. DESIGNATION Name of Authorize Plateau Name of Authorize El Paso if well produces of give location of to If this production V. COMPLETION	A 1 R  A 15  OF TRANSPO  ed Transporter of 1, Inc.  ed Transporter of 5 Natural oil or liquids, anks.  n is commingled	Peet From The Township 27N  ORTER OF OIL AND OIL OF Condet  Casinghead Gas Gas Company Unit Sec.  with that from any other	north Ling Range  D NATURAL GAR  or Dry Gas X  Twp. Rge.	Address (Give address to whe Box 180, Farmi Address (Give address to whe Box 990, Farmi Is gas actually connected?	state, 1 eet From The 6 San Juan sich approved copy ngton, New ich approved copy ngton, New when	of this form is to be Mexico of this form is to be	County e sent) e sent)
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V. TEST DATA AND REQUEST FOR ALLOWABLE
OIL WELL

Date First New Oil Run To Tanks

Date of Test

Tubing Pressure

Actual Prod. During Test

Oil-Bbis.

(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)

Producing Method (Flow, pump, gas lift, etc.)

Casing Pressure

Choke Size

Actual Prod. During Test

Oil-Bbis.

Water-Bbis.

CASING & TUBING SIZE

HOLE SIZE

DEPTH SET

man 1 6 1913

SACKS CEMENT