Designate Type of Completion — (X) X X  Date Spudded 3-20-74		DISTRIBUTION SANTA FE FILE I	REQUEST	ONSERVATION COMMISSION FOR ALLOWABLE AND	Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65	
E. Trado No. Learnell. God Company P. O. Box 990, Partmington, BR 87801    Residelly to Hing (Creek prover fact)   Company in Transporter off.   Day One	1.	LAND OFFICE  TRANSPORTER OIL / GAS / OPERATOR / PRORATION OFFICE	AUTHORIZATION TO TRA	NSPORT OIL AND NATURAL G	GAS	
P. O. Box 900, 907mington, Bit. 87MO1   Personal Company in Transporter of Message in Conservation (Change in Transporter of Octoberation)   Conservation (Change in Conservation)   Conservation (Change in Change in Conservation)   Conservation (Change in Change in						
New York   Recomplished   County in Transporter of the Recomplished Cost   Considerative   C						
Recomplation   Controlled   Considered Con		1				
H change of ownership give name and defers of previous owner.    RESCRIPTION OF WELL AND LEASE				s 🔲	·	
BECKEPTON OF WELL AND LEANE   Total State   Description   State   Total State   Description   State   Total State   Description   State   Total State   Description   State   Total State   Description   Description   Total State   Description   Description   Total State   Description   Descript			Casinghead Gas Conden	sate		
Less   Name   Hamer Part   North   From The   Back   Dank of State   Press		and address of previous owner				
Unit Latter D	11.	Lease Name	Well No. Pool Name, Including Fo	1 ,	,	
Unn Letter D , 800   Feet From The   Morth   Line and   800   Feet From The   Morth			73 Basin Dakot	a State Federa	NM Φ1074	
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS    Design Authorized Transporter of Oil		I —	Feet From The North Lin	e and 800 Feet From 1	The West	
Notice of Authorized Transporter of Oil Or Condender ST Property of Property of State of Property of State of Property of State O		Line of Section 1 Tow	nship 26N Range	11W , NMPM, . St	an Juan County	
EL Paso Natural Gas Company  If well produces at its risude, give location to trains.  D 1 26N; 11W  16 this production is commingled with that from any other lease or pool, give comminging order number:  If this production is commingled with that from any other lease or pool, give comminging order number:  IV. COMPLETION DATA  Designate Type of Completion - (X)  Cit Well Gas well New Well Workover Deepen Flug Book Some Resry. [Diff, Resry Work Well Well Well Well Well Well Well Wel	m.	Name of Authorized Transporter of Oil or Condensate A Address (Give address to which approved copy of this form is to be sent)  El Paso Natural Gas Company  P. O. Box 990, Farmington, NM 87401				
If well production is comminged with that from any other lease or pool, give comminging order number:  If this production is comminged with that from any other lease or pool, give comminging order number:  If this production is comminged with that from any other lease or pool, give comminging order number:  If this production is comminged with that from any other lease or pool, give comminging order number:  If this production is comminged with that from any other lease or pool, give comminging order number:  If this production is comminged with that from any other lease or pool, give comminging order number:  If this production is comminged with that from any other lease or pool, give comminging order number:  If this production is comminged with that from any other lease or pool, give comminging order number:  If this production is comminged with that from any other lease or pool, give comminging order number:  If this production is comminged with and find the information given above is true and complete to the best of my knowledge and belief.  If this is a request for allowable for allowa			ompany	P. O. Box 990, Farm	ington, NM 87401	
New Well   New Yell   New Well   New Yell   New Well   New Yell		If well produces oil or liquids, D 1 26N 11W				
Date Spudded  3 -20 -74  6 -21 -7h  6 -27 -7h  7 -1  7 -1  7 -1  7 -1  7 -1  7 -1  7 -1  7 -1  8 -2 -2  8 -2 -2  8 -2 -2  8 -2 -2  8 -2 -2  8 -2 -2  8 -2 -2  8 -2 -2  8 -2 -2	iv.	If this production is commingled wit COMPLETION DATA			Plug Back   Same Resty.   Diff, Resty.	
3-20-714  Elevations (DF, RKB, RT, CR, etc., Name of Froducting Formation Dakota (643) (G1) Dakota (643) (G2) Dakota (643) (G3) Dakota (643) (G3) Dakota (643) (G3) Dakota (643) (G3) Dakota (G3) Dako		Designate Type of Completio	<u> </u>			
Elevations (DF, RKB, RT, GR, etc.,   Name of Producting Formation   10 page (das Pay   6434 of 1)   10 page (das Pay   6434 of 1)   10 page (das Pay   6563 of 1)   10 page (das Pay   6563 of 1)   10 page (das Pay   6697 of 1)   10 page (das Pay   6697 of 1)   10 page (das Pay   6697 of 1)   12 1/4 of 1)   12 1/4 of 1 page (das Pay   6697 of 1)   12 1/4 of 1)   12 1/4 of 1 page (das Pay   6697 of 1)   12 1/4			I	i		
TUBING, CASING, AND CEMENTING RECORD  TUBING, CASING, AND CEMENTING RECORD  HOLE SIZE  CASING & TUBING SIZE  DEPTH SET  SACKS CEMENT  12 1/4"  8 5/8"  205'  182 cu. ft.  12 1/8"  1 1/2"  6697'  TUBING CASING, AND CEMENTING RECORD  182 cu. ft.  192 cu. ft.  193 cu. ft.  194 cardinario admined complete fo				Top 🎏/Gas Pay	Tubing Depth 6563*	
TUBING, CASING, AND CEMENTING RECORD  HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT  12 1/4" 8 5/8" 205" 182 cu. pt.  7 7/8" 1 1 1/2" 6697; 1219 cu. pt.  2 3/8" 0563" 182 cu. pt.  12 1/4" 18 5/8" 205" 182 cu. pt.  13 1/2" 6697; 1219 cu. pt.  14 1/2" 6697; 1219 cu. pt.  15 1/4" 18 1/2" 6697; 1219 cu. pt.  16 1/4" 19 1/2" 6697; 1219 cu. pt.  17 1/8" 19 1/2" 6697; 1219 cu. pt.  18 1/4" 19 1/4" 6697; 1219 cu. pt.  18 1/4" 19 1/4" 6697; 1219 cu. pt.  18 1/4" 19 1/4" 6697; 1219 cu. pt.  2 3/8" 0563" 1001 24 hours)  10 1/4" 18 hours 16 for this depth or be for full 24 hours)  18 1/4" 19 1/4		Perforations 64081, 64801, 65	Perforations			
12 1/4"   8 5/8"   205"   182 cu. ft.		TUBING, CASING, AND CEMENTING RECORD				
V. TEST DATA AND REQUEST FOR ALLOWABLE  OIL WELL  Dute First New Oil Run To Tanks  Date of Test  Length of Test  Actual Prod. During Test  Actual Prod. During Test  Actual Prod. During Test  Actual Prod. Test-MCF/D  1614  Actual Prod. Test-MCF/D  162  Calc. AOF  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.  (Title)  6-27-74  (Dire)  VI. TEST DATA AND REQUEST FOR ALLOWABLE  (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for field able for this depth or be for full 24 hours  Producing Meshed (Flow, pump, gas lift, etc.)  Casing Pressure  Casing Pressure  Casing Pressure  Casing Pressure  (Shut-in)  10 - 44  11 - 45 - 3  1959  OIL CONSERVATION COMMISSION  APPROVED  7-1 19 74  This form is to be filled the compliance with substant of the selevistic tests to the well as advertisence with out of despensary of the selevistic tests to the most the well as advertisence with out of the selevistic tests the nor the well as advertisence with out of the selevistic tests on the well as advertisence with out of the selevistic tests the nor the well as advertisence with out of the selevistic tests the nor the well as advertisence with out of the selevistic tests the nor the well as advertisence with out of the selevistic tests the nor the well as advertisence with out of the selevistic tests the nor the well as advertisence with out of the selevistic tests the nor the well as advertisence with out of the selevistic tests the nor the well as advertisence with out of the selevistic tests the nor the well as advertisence with out of the selevistic tests the nor the well as advertisence with out of the selevistic tests the nor the well as advertisence with out of the selevistic tests the nor the well as advertisence with out of the selevistic tests the north out of the selevistic tests the				<del></del>	<del></del>	
V. TEST DATA AND REQUEST FOR ALLOWABLE  OH. WELL  Date First New Oil Run To Tanks  Date of Test  Tubing Pressure  Casing Pressure  Casing Pressure  Casing Pressure  Casing Pressure  Casing Pressure  Choke Size  Actual Prod. During Test  Casing Pressure  Choke Size  Casing Pressure  Choke Size  Actual Prod. Test-MCF/D  1614  3 hours  Tubing Pressure(Shut-in)  Casing Pressure(Shut-in)  Casing Pressure(Shut-in)  Casing Pressure(Shut-in)  Casing Pressure(Shut-in)  Casing Pressure(Shut-in)  Casing Pressure(Shut-in)  Complete to the pressure(Shut-in)  Casing Pressure(Shut-in)  Complete						
Actual Prod. During Test    Date First New Oil Run To Tanks   Date of Test   Producing Method (Flow, pump, gas lift, etc.)		177		6563'	tubing	
Date First New Oil Run To Tanks  Date of Test  Length of Test  Length of Test  Actual Prod. During Test  Oil-Bbis.  Casing Pressure  Casing Pressure  Casing Pressure  Choke Size  Casing Pressure  Choke Size  Casing Pressure  Choke Size  Casing Pressure  Choke Size  Actual Prod. During Test  Oil-Bbis.  Mater-Bbis.  Gas-MCF  Bbis. Condensate/MMCF 3 hours  Io.44 45.3  Casing Pressure (Shut-in)  Calc. AOF  Calc. AOF  Calc. AOF  Iola  Interesting Method (pitot, back pr.)  Calc. AOF  Iola  Iol	v.	TEST DATA AND REQUEST FO	OR ALLOWABLE (Test must be a	fter recovery of total volume of load oil	and must be equal to or exceed top allow-	
Actual Prod. During Test  GAS WELL  Actual Prod. Test-MCF/D  1614  Actual Prod. Test-MCF/D  1614  Testing Method (pitor, back pr.)  Calc. AOF  Tobing Pressure (Shut-in)  Calc. AOF  Calc. AOF  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.  Drilling Clerk  (Signature)  Drilling Clerk  (Title)  6-27-74   Water-Bbls.  Gas-MCF  Bbls. Condensate/MEXEF 3 hours  Gravity of Condensate  10.44  45.3  Casing Pressure (Shut-in)  Coding Pr		OH, WELL				
Actual Prod. During Test  GAS WELL  Actual Prod. Test-MCF/D 1614  Actual Prod. Test-MCF/D 1614  Testing Method (pitot, back pr.) Calc. AOF  VI. CERTIFICATE OF COMPLIANCE  I hereby certify that the rules and regulations of the Oil Conservation Commission have been complete with and that the information given above is true and complete to the best of my knowledge and belief.  Drilling Clerk  (Signature)  Drilling Clerk  (Title)  6-27-74   Water-Bbis.  Water-Bbis.  Water-Bbis.  Water-Bbis.  Water-Bbis.  Water-Bbis.  Water-Bbis.  Gas-MCF  Bbis. Condensate/MMCF 3 hours  10.44  45.3  Casing Pressure (Shut-in) 1959  Choke Size  3/4" variable  OIL CONSERVATION COMMISSION  APPROVED  7-1 19 24  This form is to be flight in compliance with rule 1104.  If this is a request for allowable foot newly drilled or deepens well, this form must be accompanied by a tabulation of the deviation that the compliance with rule 111.  All sections of this Acord must of Miles out-completely for allowable no new and recompilite Order auch change of condition with name or number, or transporter, or there such change of condition with name or number, or transporter, or there such change of condition with name or number, or transporter, or there such change of condition with name or number, or transporter, or there such change of condition with name or number, or transporter, or there such change of condition with name or number, or transporter, or there such change of condition with name or number, or transporter, or transpo			Tuhing Pressure	Casing Pressure	Choke Size	
GAS WELL  Actual Prod. Test-MCF/D  1614  Testing Method (pitot, back pr.)  Calc. AOF  Tubing Pressure (shut-in)  Calc. AOF  Tomation given above is true and complete to the best of my knowledge and belief.  Drilling Clerk  (Title)  6-27-714  Actual Prod. Test-MCF/D  Ship. Condensate/MMXF 3 hours  Too. 444  10. 445.3  Casing Pressure (shut-in)  Coding Pressure (shut-in)  Code ing Pressure (shut-in)  Cod		Length of lest	1.000.4 1.000.00	, .		
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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.  APPROVED  Original Signal Signa					Choke Size	
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.    Approved	***	Calc. AOF		<u> </u>		
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.  BY Original Signed BY theory C. Arnold BY This form is to be filled in compliance with TULE 1104.  This form is to be filled in compliance with TULE 1104.  If this is a request for allowable for a newly drilled or deepend well, this form must be accompanied by a tabulation of the deviation of the deviation of this form must be accompanied by a tabulation of the deviation of the series taken on the well in adsordance with TULE 1104.  All sections of this form must be accompanied by a tabulation of the deviation of the series taken on the well in adsordance with TULE 1104.  All sections of this form must be accompanied by a tabulation of the deviation of the deviation of the series taken on the well in adsordance with TULE 1104.  All sections of this form must be accompanied by a tabulation of the deviation of the deviation of the deviation of the section of this form must be accompanied by a tabulation of the deviation of the section of the deviation of the deviation of the section of this form must be accompanied by a tabulation of the deviation of the section of this form must be accompanied by a tabulation of the deviation of the section of the deviation of the deviation of the section of	VI.	I hereby certify that the rules and regulations of the Oil Conservation				
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Drilling Clerk  All sections of this form mus of Allied out completely for allowable on new and recompiled belief.  Fill out only Sections h. H. fill, and VI for changes of owner well name or number, or transporter, or other such change of conditions.			iture)	This form is to be filled in compliance with RULE 1104.  If this is a request for allowable for a newly drilled or despend well, this form must be accompanied by a tabulation of the deviation tests taken on the well in absordance with Till.  All sections of this form must of this our completely for allowable on new and recompliance wells.		
6-27-74  Fill out only Sections h. II. III. and VI for changes of owner well name or number, or transporter, or other such change of condition		Drilling Clerk				
II = '₹		6-27-74				