		- <i>j</i> .	
#0. 07 (OPIES ##C	6		
DISTRIBUTION			
SANTA FE			
FILE		7	_
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS	1	
OPERATOR			
PROBATION OFFICE		13	

## NEW MEXICO OIL CONSERVATION COMMISSION

	SANTA FE /	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-1111		
	U.S.G.S.	AUTHORIZATION TO TR	AND ANSPORT OIL AND NATURAL,	Effective 1-1-65		
	TRANSPORTER OIL GAS /		•			
	OPERATOR PROPATION OFFICE		·	AP1 30-045-23808		
1.	DOME PETROLEUM CORPORATION					
	501 Airport Drive, Su	1 Airport Drive, Suite 107, Farmington, New Mexico 87401				
	Reason(s) for filing (Check proper box New Welt KX					
	Recompletion	Change in Transporter of:  CII Dry Gas XX				
	Change In Ownership	Casinghead Gas Conde	nsate			
	If change of ownership give name and address of previous owner					
11.	DESCRIPTION OF WELL AND Lease Name	LEASE   Well No.   Pool Name, Including F	ormation   Kind of Leas	e Jeane No.		
	DOME NAVAJO 13-26-13	4 WAW FRUITLAND	-PICTURED CLIFF State, Federa	NOO-C-14-20 NAVAJO 7476		
	Unit Letter M : 1120	Feet From The <u>SOUTH</u> Lir	ne and 790 Feet From	The WEST		
	Line of Section 13 To	wnship 26N Range	13W , NMPM, S.	AN JUAN County		
III.	DESIGNATION OF TRANSPOR'  Name of Authorized Transporter of Oil					
			Address (Give address to which appro			
	Name of Authorized Transporter of Cas	<u> </u>	Address (Give address to which appro	1		
	EL PASO NATURAL GAS CO If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Pge.	P.O. Box 990, Farmingto Is gas actually connected? Who			
IV.	If this production is commingled wir COMPLETION DATA	this production is commingled with that from any other lease or pool, give commingling order number:				
	Designate Type of Completion	on - (X)   Oil Well   Gas Well   X	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.		
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
	11/07/79 Elevations (DF, RKB, RT, GR, etc.)	12/04/79 Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth		
	6068 GR	PICTURED CLIFF .	1169!	NONE		
	1212'-1218'	,		Depth Casing Shoe		
	HOLE SIZE	T	CEMENTING RECORD	5.045.0545.15		
	8 3/4"	CASING & TUBING SIZE  5 1/2"	DEPTH SET	SACKS CEMENT 35 SACKS		
	4 3/4"	2 7/8"	1317'	125 sacks		
			1			
¥.	TEST DATA AND REQUEST FOOL WELL		fter recovery of total volume of load oil pth or be for full 24 hours)	and must be equal to or exceed top allow-		
	Date First New Cil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lij	(i, etc.)		
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size		
	Actual Pred, During Test	Oil-Bble.	Water-Bbls.	Gas-Met-		
l	GAS WELL Actua: Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate		
	980	3 hours Tubing Presewe(shut-in)	Casing Pressure (Shut-in)			
	Teating Method (pitot, back pr.)  BACK PRESSURE	218 psi	218 psi	Choke Size		
VI.	CERTIFICATE OF COMPLIANCE		OIL CONSERVA	TION COMMISSION		
	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.  H.D. HOLLINGSWORTH Signature)		APPROVED DEC 2 1 1979 19			
			By Original Signed by A. R. Kendrick			
			TITLE  SUPERVISOR DISTRICT # 3  This form is to be filed 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 accordance with RULE 111.			
-						
	DRILLING & PRODU		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 mane or number, or transporter, or other such change of condition.			
	December 5.					
•	December 5, (Date of the little of the littl					

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.