ſ	NO. OF COPIES RECEIVED				
	DISTRIBUTION	_	CONSERVATION COMMISSION	Form C-104 Supersedes Old C-104 and C-110	
$\frac{1}{2}$	FILE /	REQUES	T FOR ALLOWABLE AND	Effective 1-1-65	
	U.S.G.S.	AUTHORIZATION TO TE	RANSPORT OIL AND NATURAL GA	S	
	LAND OFFICE				
	TRANSPORTER GAS /				
	OPERATOR /				
1.	PRORATION OFFICE Operator		A CONTRACTOR OF THE CONTRACTOR		
	DEPCO, Inc.				
	1025 Petroleum Club BuildingDenver, CO 80202				
	Reason(s) for filing (Check proper box) Other (Please explain)				
	New Well	Change in Transporter of:			
	Recompletion Change in Ownership	Oil Dry Casinghead Gas Cond	densate		
l				,	
	If change of ownership give name and address of previous owner				
	DESCRIPTION OF WELL AND I	EASE			
1.	Lease Name	Lease No. Well No. Pool	, calley the factor of the fac	Kind of Lease State, Federal or Fee Radaral	
		SF 079116 13 We	st Kutz - P. C.	State, Federal or Fee Federal	
	Unit Letter I : 165	1.550 0.11 000 Foot			
	Onit Letter				
	Line of Section 11 Tow	nship 27N Range	12W , NMPM, San Ju	an County	
II.	DESIGNATION OF TRANSPORT	ER OF OIL AND NATURAL O	Address (Give address to which approve	d copy of this form is to be sent)	
	Name of Authorized Transporter of Cas	inghead Gas 🗍 or Dry Gas 🔀	Address (Give address to which approve	ed copy of this form is to be sent)	
	Gas Company of New Mexico First International Bldg-Dallas, TX 75270				
		Unit Sec. Twp. Rge.	Is gas actually connected? When	tober 4, 1950	
	give location of tanks.			CODEL 4, 1750	
	If this production is commingled wit COMPLETION DATA			Plug Back Same Resty. Diff. Resty.	
	Designate Type of Completio	n - (X) Gas Well	New Well Workover Deepen	Pring Back Banks 1100	
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
			Top Oil/Gas Pay	Tubing Depth	
	Elevations (DF, RKB, RT, GR, etc.)	Name of Froducing Formation	Top On/Gas Pay	tubing Depth	
	Perforations			Depth Casing Shoe	
		TUDING CASING	AND CEMENTING RECORD		
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
v.	TEST DATA AND REQUEST FO	OR ALLOWABLE (Test must b	e after recovery of total volume of load oil a s depth or be for full 24 hours)	nd must be equal to or exceed top allow-	
	OIL WELL Date First New Oil Run To Tanks Date of Test		Producing Method (Flow, pump, gas lift, etc.)		
	Length of Test	Tubing Pressure	Casing Pressure		
	Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	PALMATO /	
			***	D 0/1076	
	CAC HITTY		SE	.	
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF OIL	DIST. 3	
		The base of the same of the sa	Casing Pressure	Choke Size	
	Testing Method (pitot, back pr.)	Tubing Pressure			
VΙ	CERTIFICATE OF COMPLIAN	CE	<i>t</i> :	TION COMMISSION	
			II and the second of	1976	

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.

strict Production Superintendent (Title)

August 31, 1976

(Date)

SEF APPROVED_ Original Signed by A. R. Kendrick

SUPERVISOR DIST. #3

This form is to be filed in compliance with RULE 1104.

TITLE _

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.