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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL 1
	GAS
OPERATOR	2
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

1. Operator	SINCLAIR OIL CORPORATION	Sinclair Oil Corporation Merged into Atlantic Richfield Company effective March 4, 1969
Address	Sinclair Oil & Gas Company 501 Lincoln Tower Building - 1840 Lincoln St., Denver, Colorado 80202	
Reason(s) for filing (Check proper box)	Other (Please explain)	
New Well	Change in Transporter of:	Repair of indicated leak between Gallup and Dakota formations. Request for re-test.
Recompletion	Oil	
Change in Ownership	Casinghead Gas	
	Dry Gas	
		Condensate

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Schlusser W# Federal	1	Gallup, Kuba	Federal State, Federal or Fee	87 078673
Location				
Unit Letter	790	Feet From The	North	Line and
Line of Section	10	Township	87 North	Range
			11 West	NMPM, San Juan
				County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil	or Condensate	Address (Give address to which approved copy of this form is to be sent)				
Forman Corporation		Box 3119, Midland, Texas 79701				
Name of Authorized Transporter of Casinghead Gas	or Dry Gas	Address (Give address to which approved copy of this form is to be sent)				
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	0	20	27N	12W	No	

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
	X			X			X	
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
			6797'					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
6249 OL	Gallup	5962'	5993'					
Perforations	Depth Casing Shoe							
5962-5982' & 6036-6054'								
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET						
No change in casing.	8-3/4" CB	5993'						
OIL CON. COM.								

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 greater than allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)		
	9/8-9/9/67	Flow		
Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
12 hr	FTP 04, 24 hr 3750		3/4	
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF	
	3	None		

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

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.

Emery C. Arnold
Area Supervisor (Signature)

Sept. 12, 1967 (Date)

OIL CONSERVATION COMMISSION

SEP 14 1967

APPROVED _____, 19____
BY Original Signed by Emery C. Arnold
TITLE SUPERVISOR DIST. #3

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.