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ma or cories mecelves			Q
DISTRIBUTION		L	
SANTA FE			
FILE		1	~
U.S.G.S.			
LAND OFFICE		<u> </u>	
TRANSPORTER	OIL		
	GAS	1	
OPERATOR		3	
PROBATION OFFICE			i

	SANTA FE	REQUEST FO	OR ALLOWABLE	Supersedes Old C-104 and C-110 Effective 1-1-65		
	FILE		AND COORT OIL AND MATHRAL CA	· c		
ł	U.S.G.S.	AUTHORIZATION TO TRAN	SPORT OIL AND NATURAL GA	3		
ł	TRANSPORTER OIL	•				
	GAS /					
	OPERATOR 3					
L	PRORATION OFFICE					
		o Oil Company				
	Address		Colorado 80203			
	Suite 1200 Lincoln	Tower Bldg. Denver,	Other (Please explain)			
	Reason(s) for filing (Check proper box) New Well Change in Transporter of: Other (Please explain) From Southern Union Gas Comp					
	Recompletion	Oil Dry Gas	₩			
	Change in Ownership	Casinghead Gas Condense	Effective 8/1	/70		
1	If change of ownership give name					
and address of previous owner						
_	DESCRIPTION OF WELL AND I	FASF				
ш.	Lease Name Well No. Pool Name, including Formation					
	OMLER 7 FULCHER KUTZ H State, Federal or Fee					
	Location					
	Unit Letter : 1650 Feet From The South Line and 1650 Feet From The Cast					
	Line of Section 26 Tow	mship 2 Fange	10 , NMPM, 50	31 JUSH County		
Line of Section ()						
Ш.	DESIGNATION OF TRANSPORT	ER OF OIL AND NATURAL GAS	Address (Give address to which approve	d copy of this form is to be sent)		
	Name of Authorized Transporter of Oil	or Condensate	Address (Otto Basiss so Division opp.			
	Name of Authorized Transporter of Cas	inghead Gas or Dry Gas XX	Address (Give address to which approve	ed copy of this form is to be sent)		
	Southern Union Gathe	ring Company	Fidelity Union Tower Bld	g Dallas, Texas		
	If well produces oil or liquids,	Unit Sec. Twp. Pge.	Is gas actually connected? When			
	give location of tanks.		1,			
If this production is commingled with that from any other lease or pool, give commingling order number:						
IV.	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Resty. Diff. Resty.		
	Designate Type of Completion	on = (X)	· · · · · · · · · · · · · · · · · · ·			
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
		Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth		
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Pointaini	100 011/ 012 1 1/			
	Perforations			Depth Casing Shoe		
•		TUBING, CASING, AND CEMENTING RECORD SACKS CEMENT DEPTH SET SACKS CEMENT				
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET			
	·					
V	V. 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 this depth or be for full 24 hours)					
OIL WELL Date First New Oil Run To Tanks Date of Test Producing Method (Flow, pump, gas lift, etc.)				t, etc.)		
		•	·	Choke Size		
	Length of Test	Tubing Pressure	Casing Pressure	CHOLD SIZE		
		Oil-Bbls.	Water-Bbls.	Gas-MCF		
	Actual Prod. During Test	OII-Bale.		Λ./		
			<u> </u>			
GAS WELL				Gravity of Condengate		
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity or condengate		
		Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size		
	Testing Method (pitot, back pr.)	I dollad blassage Court-11				
• **	CEPTIFICATE OF COURT IAN	ICE	OIL CONSERVATION COMMISSION			
VI. CERTIFICATE OF COMPLIANCE			ALIC 9 1 107	0, 19		
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 AUG 31 1970 . 19				
		By Original Signed by A. R. Kendrick				
		TITLE PETROLEUM ENGINEER DIST. NO. 3				
		This form is to be filed in compliance with RULE 1104.				
	(Signature) G. A. Ford Sr. Production Clerk		This form is to be fried in completely drilled or deepened 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 allow-			

(Title)

(Date)

8/28/70

able on new and recompleted walls. 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