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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

INLAND CORPORATION PURCHASED ALL THE ASSETS  
OF BOTH LaMAR TRUCKING, INC. AND INLAND CRUDE,  
INC. THIS PURCHASE INCLUDED N. M. S. C. C.  
PERMIT # 670 WHICH HAS BEEN TRANSFERRED TO  
INLAND CORPORATION.

Operator TENNECO OIL COMPANY		Clyde C. LaMAR, PRESIDENT INLAND CORPORATION
Address P. O. Box 1714 Durango, Colorado		
Reason(s) for filing (check proper box)		Other (Please explain)
New Well <input type="checkbox"/>	Change in Transporter of:	Effective June 1, 1965
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>	
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input checked="" type="checkbox"/>	

If change of ownership/give name and address of previous owner: Correction of gas transporter only

II. DESCRIPTION OF WELL AND LEASE

Lease Name Florance	Well No. 25	Pool Name, Including Formation Blanco MV	Kind of Lease State, Federal or Fee
Location			
Unit Letter A	Feet From The	Line and	Feet From The
Line of Section 22	Township 29N	Range 9W	NMPM, San Juan County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
Lamar Trucking, Inc.	Box 1528 Farmington, New Mexico	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
Southern Union Gathering	Fidelity Union Tower Dallas, Texas	
If well produces oil or liquids, give location of tanks.	Unit A	Sec. 22
	Twp. 29	Rge. 9
	Is gas actually connected? When	

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.
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Pool	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
Perforations					Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			

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 exceed top 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.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

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

District Office Supervisor

October 6, 1965

(Date)

OIL CONSERVATION COMMISSION

APPROVED OCT 7 1965, 19

BY Original Signed Emery C. Arnold

TITLE Supervisor Dist. # 2

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 Sections I, II, III, and VI only 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.