	DISTRIBUTION	NEW MEXICO OIL	CONSCRIPTION	/ ^
	ANTA FE	REQUEST	CONSERVATION COMMISSION FOR ALLOWABLE AND	Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65
	LAND OFFICE  TRANSPORTER OIL GAS /	AUTHORIZATION TO TR	ANSPORT OIL AND NATURAL	GAS
1.	OPERATOR 4 PRORATION OFFICE Operator			
	Zallea Bros. & S. Laub			
	That Emerson Rd Wilmington, Del. 19802			
	Reason(s) for filing (Check proper box)  New Well Change in Transporter of:  Recompletion Oil Dry Gas remove name of operators agent  Change in Ownership Casinghead Gas Condensate (deceased)			
	If change of ownership give name and address of previous owner	N. B. Gerber, 120	Wall St., New York	, N.Y.
11.	DESCRIPTION OF WELL AND	LEASE Well No. Fool Name, Including F		
	State Tred Ste			Lease No. E 178
	1 =	790 Feet From The 5	ne and 1630 Feet From	The W (West Half(W/)
	Line of Section \$2 Township 30 North Range 7 West , NMPM, Rio Arriba County			
111.	Name of Authorized Transporter of Oil Or Condensate Address (Give address to which approved copy of this form is to be sent)			
	Name of Authorized Transporter of Ca Fl Laco Natureal	Gas Co. att: J.Ahlm	Address (Give address to which appropriate Farmington, New Mo	oved 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? Wh	December 1963
IV.	If this production is commingled with that from any other lease or pool, give commingling order number:  COMPLETION DATA			
	Designate Type of Completic	on - (X) Gas Well	New Well Workover Deepen	Plug Back   Same Restv. Diff. Restv.
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	dubing Depth
	Perforations	1		Depth Casing Shee
		TUBING, CASING, AND	CEMENTING RECORD	1 3 com
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS DEMENT
				of dist.
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. WELL			
İ	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lij	(t, etc.)
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size
İ	Actual Prod. During Test	Oil-Bbls.	Water-Bble.	Gas-MCF
ι,	GAS WELL			
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate

Tubing Pressure (Shut-in)

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.

"Lartnor

(Title) 7/11/75

(Date)

Testing Method (pitot, back pr.)

VI. CERTIFICATE OF COMPLIANCE

OIL CONSERVATION COMMISSION

Choke Size

AUG 19 1975 APPROVED\_

By Original Signed by A. R. Kendrick

Casing Pressure (Shut-in)

TITLE PETROLEUM ENGINEER DIST. 10.

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

If this is a request for silowable for a newly drilled or despened 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. Sanarate Forms C-10d must be filed for each nool in multiplu