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TRANSPORTER	OIL	
	GAS	1
OPERATOR		
PROBATION 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-12
Effective 1-1-65

Operator		ARAPAHOE DRILLING COMPANY	
Address			
P.O. BOX 26687 / ALBUQUERQUE, NEW MEXICO 87125			
Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well	☐	Change In Transporter of:	
Recompletion	☐	Oil	☐
Change In Ownership	☒	Casinghead Gas	☐
		Dry Gas	☐
		Condensate	☐

If change of ownership give name and address of previous owner Coastline Petroleum Co., Inc. / One Greenwich Plaza, Greenwich Conn 06830

Lease Name		Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
Schalk 57		2	Blanco Mesa Verde	State, Federal or Fee Fed NM	4457
Location					
Unit Letter	B	935	Feet From The N	Line and 985'	Feet From The East
Line of Section	12	Township	30 N	Range	5 W
				NMCM, Rio Arriba	County

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)	
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒		Northwest Pipeline Corporation		P.O. Box 1526, Salt Lake City, Utah	
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Pge.	Is gas actually connected? When
					No

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

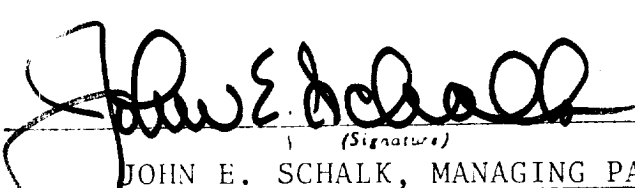
COMPLETION DATA		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Designate Type of Completion - (X)			XX						
Date Spudded	10/1/74	Date Compl. Ready to Prod.	12/16/74	Total Depth	6100 KB	P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)		Name of Producing Formation	Mesa Verde	Top Oil/Gas Pay	5646 KB	Tubing Depth			
Perforations		5664-5700, 5740-5758, 5774-5810, 5898-6010				Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE		CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4		8-5/8		306		200 sks Class "C"			
7-7/8		4-1/2		6100		1st-		220 Halli & 160 sks	
						2nd-		286 sks. Hallilight	
						3rd-		350 sks Hallilight	

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 (pilot, back pr.)		Tubing Pressure (Shut-in)		Casing Pressure (Shut-in)	Choke Size	

I. CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION	
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 _____, 1978	
BY: Original Signed by A. R. Kendrick		TITLE _____	
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 filled for each pool in multiple.			


JOHN E. SCHALK, MANAGING PARTNER
March 15, 1978
(Date)