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LAND OFFICE	
TRANSPORTER	OIL GAS
OPERATOR	
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE

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

AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

DEPT. OF
NATURAL RESOURCES

APR 11 - 1965

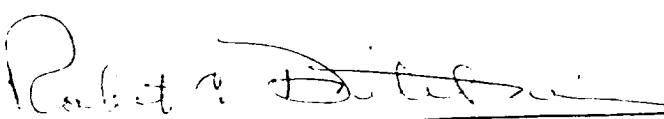
Operator ROBERT C. DINTELMAN		OIL CON. DIV. DIST. 3	
Address 3109 Mesa Drive,		Farmington, New Mexico 87401	
Reason(s) for filing (Check proper box) New Well <input type="checkbox"/> Recompletion <input type="checkbox"/> Change in Ownership <input checked="" type="checkbox"/>		Other (Please explain) Change in Transporter of: Oil <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Dry Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	
If change of ownership give name and address of previous owner William C. Russell, 227 East 59 New York, N. Y. 10022			

II. DESCRIPTION OF WELL AND LEASE				
Lease Name Viles	Well No. 1	Pool Name, including Formation Fulcher Kutz P. C.	Kind of Lease State, Federal, or Fee Fed.	Lease No. 047019-B
Location Unit Letter I 1650 Feet From The South Line and 990 Feet From The East line Line of Section 30 Township 29 N Range 11 W , 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 type="checkbox"/>		Address (Give address to which approved copy of this form is to be sent)		
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)		
El Paso Natural Gas Company		Box 1492 El Paso, Texas, 79978		
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Pge.
				yes 1953
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'tv.	Diff. Res'tv.
			XX						
Date Spudded 7-20-53	Date Compl. Ready to Prod. 8-6-53		Total Depth 1506		P.B.T.D. 1500				
Elevations (DF, RKB, RT, GR, etc.) 5392 GR	Name of Producing Formation Pictured Cliffs		Top Oil/Gas Pay 1450		Tubing Depth 1448				
Perforations Open Hole - 1456 to 1506						Depth Casing Shoe 1456			
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 (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. 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 _____, 19____	
 (Signature) Robert C. Dintelman (Title) Operator (Date) 6-30-83		BY Original Signed by FRANK T. CHAVEZ 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 filed for each pool in multiply completed wells.	