N	<u> </u>			
				
				
	7	т.		
LAND OFFICE				
OIL	1			
GAS				
OPERATOR				
PRORATION OFFICE				
	GAS	GAS		

	DISTRIBUTION SANTA FE		ONSERVATION COMMISSION FOR ALLOWABLE	Form C-104 Supersedes Old C-104 and C-110
	FILE		AND	Effective 1-1-65
	U.S.G.S.	AUTHORIZATION TO TRA	NSPORT OIL AND NATURAL	GAS
	LAND OFFICE			
	TRANSPORTER GAS			
	OPERATOR			
I.	PRORATION OFFICE	:		
	Operator			
	Astro CLL & Gas Cong			
	Address	Ann. There bland on		
	Reason(s) for filing (Check proper box)	ten, Nov Mexico	Other (Please explain)	
	New Well	Change in Transporter of: 🖁	Office (1 tease explain)	
	Recompletion	Off Day Gas	s K	
	Change in Ownership	Casinghead Gas	sate	
	If change of ownership give name and address of previous owner			
II.	DESCRIPTION OF WELL AND	LEASE	ne, Including Formation	Kind of Lease
	Lease Maile		hein Bekote	State, Federal or Fee
	Location			
	Unit Latter I . 196	Feet From The South Lin	e and 660 Feet From	The Best
	Unit Letter ;			
	Line of Section 18 , Tov	vnship Range	, NMPM,	County
III.		TER OF OIL AND NATURAL GA	S Address (Give address to which appr	and cany of this form is to be sent
	Name of Authorized Transporter of Oil		1909 Moonfield Myd	
	Name of Authorized Transporter of Cas			oved copy of this form is to be sent)
	Southern Union Cas (1507 Panific, Dallan	
		Unit Sec. Twp. Rge.		hen
	If well produces oil or liquids, give location of tanks.	I 18 298 134	10	
	If this production is commingled with	th that from any other lease or pool,	give commingling order number:	
IV.	COMPLETION DATA	in that from any other reads of post,		
	Designate Type of Completic	Oil Well $\frac{1}{1}$ Gas Well on $= (X)$	New Well Workover Deepen	Flug Back Same Res'v. Diff. Res'v.
		Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
	Date Spudded	Date Compi. Reday to Prod.	5723	9600
	Pool	Name of Producina Formation	Top Cil/Gas Pay	· Tubing Depth
	Basin Dehota	Dahota	56 2 k	5722
	Ferforations			Depth Casing Shoe
	5604-08; 564e-	16		
			CEMENTING RECORD	
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
		4-1/2" Casing	57000 55M6	
		S-Ao smerit	, , , , , , , , , , , , , , , , , , ,	
1 7	TEST DATA AND REQUEST E	OR ALLOWABLE (Test must be a	fter recovery of total volume of load o	il and decreed to or exceed top allow-
•	OIL WELL	able for this de	epth or be for full 24 hours)	OFI'HIM
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas	%, vrriliatu /
			Casir.g Pressure	FUZIN CIZO
	Length of Test	Tubing Pressure	Casing Pressure	FEB 8 ²⁰ 1965
	Actual Fred, During Test	Cil-Bbls.	Water-Bbls.	OIL COM.
	Actual Float Burning Fest			DIST. 3
	GAS WELL			
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
	hoh age	3 hour		3/4
	Testing Method (pitot, back pr.)	Tubing Pressure	Casir.g Pressure	Choke Size
	Milti-Point Back Franc	•		
VI	. CERTIFICATE OF COMPLIAN	CE	- 1005	ATION COMMISSION
			FEB 8 1965	, 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.		- 11	, 10
			BY A. R. KENDRICK	
			TITLEPETROLEUM ENG	INEER DIST. NO. 3
	CRIGINAL SIGNED BY	JOE C. SALMON		ompliance with RULE 1104.
	(Sion	ature)	It this is a request for all well, this form must be accom-	owable for a newly drilled or deepened panied by a tabulation of the deviation

	(Signatu	ure)
Manthet	District	Amerintendent
2-3-65	(Title	

(Date)

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.