	5		EIVED	NO. OF COPIES RECE	
5-000			DISTRIBUTION		
1-TCA		1		SANTA FE	
1-F	•	1		FILE	
AU			U.S.G.S.		
				LAND OFFICE	
		1	OIL	T D A NG D O D T E D	

	SANTA FE		FOR ALLOWABLE	Form C-104  Supersedes Old C-104 and C-116  Effective 1-1-65
	U.S.G.S.  LAND OFFICE	<del></del>	AND INSPORT OIL AND NATURA	AL GAS
	TRANSPORTER OIL / GAS			
	OPERATOR 1	_		
I.	PRORATION OFFICE  Operator			
	Beta Development	Co.		
	234 Petr. Club P	laza, Farmington, N. M.		
	Reason(s) for filing (Check proper bo		Other (Please explain)	
	New Well Recompletion	Change in Transporter of:  Oil Dry Ga	s	
	Change in Ownership		nsate 🗶	
	If change of ownership give name and address of previous owner			
II.	DESCRIPTION OF WELL AND	LEASE Well No. Pool No.	me, Including Formation	Kind of Lease
	Fogelson 3-11	1	Basin Dakota	State, Federal or Fee <b>Federal</b>
	Unit Letter <b>E</b> ; <b>165</b>	Feet From The North	ne and 1120 Feet F	From The West
	Line of Section 11 , T	ownship 29N Range 11	, NMPM,	San Juan County
III.		RTER OF OIL AND NATURAL GA	Address (Give address to which a	approved copy of this form is to be sent)
	Lakar Trucking,	THE ASSETS	PO Box 1528, Farmin	
	OF BOTH LOMAK TRUCKING	DED N. M. S. C.	Is gas actually connected?	When
	If which the series of the which has give to cattler of the branch of th	BEEN TRANSFERRED TO		
IV.		AND CORPORATION	give commingling order number	
	Designate Type of Complet	ion - (X)	New Well Workover Deepe	Plug Back   Same Resiv. Diff, Resiv.
	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
	HOLE SIZE	TUBING, CASING, AND	D CEMENTING RECORD  DEPTH SET	SACKS CEMENT
V.	. TEST DATA AND REQUEST	FOR ALLOWABLE (Test must be a	ifter recovery of total volume of loa	nd oil and must be equal to or exceed top allow-
	OIL WELL  Date First New Oil Run To Tanks	Date of Test	epth or be for full 24 hours)  Producing Method (Flow, pump, p	gas lift, etc.)
				act of
	Length of Test	Tubing Pressure	Casing Pressure	SITIAGO /
	Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	MAR 9 1965
	GAS WELL			M. CON. COM.
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Grave Condense te
	Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size
VI	. CERTIFICATE OF COMPLIA	NCE	OIL CONSE	RVATION COMMISSION
	I hereby certify that the rules and	d regulations of the Oil Conservation		965, 19
	Commission have been complied above is true and complete to t	with and that the information given the best of my knowledge and belief.	BY	u 2
		Original signed by: OHN T. HAMPTON	TITLE Supervisor Dist.	d in compliance with RULE 1104.
		OHN T. HAMITON	If this is a request for	allowable for a newly drilled or deepened
	Manager		tests taken on the well in All sections of this for	accordance with RULE 111. rm must be filled out completely for allow-
	March 8, 1965	Title)	able on new and recomplet	ed wells. I, III, and VI only for changes of owner, nsporter or other such change of condition.
	(	(Date)	well name or number, or trai	naporten or other agen change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

\$

