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## NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE AND

Form C-104 Supersedes Old C-104 and C-110

Effective 1-1-65 AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS Dempsey Associates Address o/c T.H. McElvain Oil and Gas Properties P.O. Box 2148. Santa Fe, New Mexico 87507
filing (Check proper box)
Other (Please explain) Reason(s) for New Well Recompletion Oil Dry Gas Change in Ownership Casinahead Gas Condensate If change of ownership give name and address of previous owner \_\_\_ DESCRIPTION OF WELL AND LEASE
| Well No. | Pool Name, Including Formation Hutchison 1 State, Federal or Fee Fulcher Kutz P.C. Fee Location 630 Feet From The North Line and 635 Feet From The East Unit Letter 1 Township 29N Line of Section Range 1 3W , NMPM, San Juan 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) None Address (Give address to which approved copy of this form is to be sent)
PO BOX. 398
Bloomfield, NM 87413 Name of Authorized Transporter of Casinghead Gas \_\_\_\_\_ or Dry Gas 🛴 Gas Company of New Mexico Unit Sec. P.ge. If well produces oil or liquids, give location of tanks. ves unknown If this production is commingled with that from any other lease or pool, give commingling order number: COMPLETION DATA Gas Well Workover Plug Back | Same Resty. | Diff. Resty. Deepen Oil Well New Well Designate Type of Completion - (X) 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 Tubing Depth Depth Casing Shoe Perforations TUBING, CASING, AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT (Test must be after recovery of total volume of load oil and must be equal to or exceed top allo able for this depth or be for full 24 hours) TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL Producing Method (Flow, pump, gas lift, etc.) Date First New Oil Run To Tanks Date of Test Casing Pressure Length of Test Tubing Pressure 001 2 8 1976 Gas-MCFOIL CON. COM. Actual Prod. During Test Oil - Bbis. Water - Bbis. DIST. **GAS WELL** Length of Test Actual Prod. Test-MCF/D Bbls. Condensate/MMCF Gravity of Condensate Casing Pressure (Shut-in) Testing Method (pitot, back pr.) Tubing Pressure (Shut-in ) Choke Size CERTIFICATE OF COMPLIANCE OIL CONSERVATION COMMISSION 001APPROVED. . 19 I hereby certify that the rules and regulations of the Oil Conservation Original Signed by A. R. Mendrick Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief. SUPERVISOR DIST. #3 For: Dempsey Associates TITLE . sollla be de 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. Ewell N. Walsh P.E. Pres. Walsh Engr. & Prod. Corp.

(Title) October 27, 1976 (Date)

completed wells.

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 transporten or other such change of condition. Separate Forms C-104 must be flied for each pool in multiply