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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-110
Effective 1-1-65

Operator SHIPROCK CORPORATION	
Address BOX 14274 OKLAHOMA CITY OKLA	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input checked="" type="checkbox"/> (ReDrill)	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Shiprock I	Well No. 101	Pool Name, Including Formation Shiprock Gallup	Navajo lease State, Fed. & Co. Sec. 14-20-603 5036
Location (101 is 165' S & 30' W of previous well # 1-10) which was			
Unit Letter I ; 2475 Feet From The South Line and 660 Feet From The East			
Line of Section 17 , Township 24 N Range 18W , NMPM, San Juan County County			

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) Farmington					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit I	Sec. 17	Twp. 24 N	Rge. 18W	Is gas actually connected? no	When

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 <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/> Redrill	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 7 13 67	Date Compl. Ready to Prod. 5 16 68		Total Depth 101		P.B.T.D.				
Pool 5185 OL	Name of Producing Formation Gallup		Top Oil/Gas Pay sand stringers 84-99'		Tubing Depth 94.20				
Perforations Open Hole completion		Depth Casing Shoe 85.5							
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE 7-7/8"	CASING & TUBING SIZE 5 1/2" Casing		DEPTH SET 85.5		SACKS CEMENT Circulated				
	XSMT 2"		94.20						

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 5/16/68	Date of Test 5/16/68	Producing Method (Flow, pump, gas lift, etc.) pump	
Length of Test 24 hr	Tubing Pressure pumping	Casing Pressure 0	Choke Size pumping
Actual Prod. During Test	Oil-Bbls. 5	Water-Bbls. 0	Gas-MCF 0

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size

VI. CERTIFICATE OF COMPLIANCE

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.

C F Stringer, Prod Supt
(Signature)

6/26/68
(Date)

OIL CONSERVATION COMMISSION

APPROVED **6-26**, 19 **68**
BY **Emmy Clum**
TITLE **SUPERVISOR DIST. #3**

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 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.