SUBMIT IN DUPLICATE* **UNITED STATES**

		OIVIIL					(See other:		:	
	DEPART	MENT	OF T	HE INT	ERIOR	.	structions reverse sid	e) O. LEASI		ION AND SERIAL NO.
		EOLOGI	CAL S	URVEY	4				9-DID-	
	·	OR DEC	ON ADLE	TION D	DODT	A NID. I	06*	6. IF IN	DIAN, ALLO	TTEE OR TRIBÉ NAME
WELL COM		OK REC	JMPLE	HON K	PORT	י שאוא		- Nax	a to Tr	bal
ia. TYPE OF WELL	: OII.	L GAS WEL	ւ 🗌	DRY C	ther	· ·		- 7. UNIT	AGREEMENT	NAME
b. TYPE OF COMP		_			ř	A			11.	
	WORK DEED	P- PLUG BACI		esvr.	ther			S. FARM	OR LEASE	NAME
2. NAME OF OPERATO	R			1 5 9		3			m jo 18	
W. C. IMBT				লৈ ও	3 ~			9. WELL	NO.	
2 ADDRESS OF OPERA	TOR					4.03		6	D 4 ND 7001	L, OR WILDCAT
210 West 3	8th Street	, Farmin	gton,	New Mean	eo - 07	441			112 11 11	, OR WILDCAL
4. LOCATION OF WELL	(Report location	n clearly and	in accorda	nce with any	State requir	ementa) -			back	OR BLOCK AND SURVEY
At surface 148	5' FNL & 2	1145' PWI	,						AREA	JA DAOCH AND GCAVA
At top prod. inter	- rval reported bel	low							-129N -R	า ตัว
				•				10	-IASH -n	70*
At total depth			1 14	PERMIT NO.	<u> </u>	DATE ISSU	TED	12, cou	NTY OR	1 13. STATE
			14.	PERMIT NO.	1	2-28	_	PAR		New Mexico
		m+ GWED 17	DAME COM	L. (Ready to	prod.) 10			B, RT, GR, ET		ELEV. CASINGHEAD
5. DATE SPUDDED	16. DATE T.D. R		1-3-69	L. (Heddy to	18	\$173	Gr.	.B, R1, GB, E1	.,	5173'
2-28-69	3-6-69	G, BACK T.D., M		22. IF MULT	IPLE COMPL.		3. INTERVAL		TOOLS	CABLE TOOLS
20. TOTAL DEPTH, MD &	TVD 21. PLU	G, BACK T.D., M	D & 110	HOW MA	NY*	` \	DRILLED	BY 110-	8654	0-119'
24. PRODUCING INTER	on THIS	COMPLETION-	TOP BOTT	OM. NAME (M	D AND TVD)*			7		5. WAS DIRECTIONAL
24. PRODUCING INTER	VAL(S), OF THIS	COMPLETION	101, 2011		•			2 1.		SURVEY MADE
Dakota 8	363-8651									YAD
26. TYPE ELECTRIC A		RIIN							27. V	VAS WELL CORED
	My Ollier Door							*		No
No			TASING R	ECORD (Rep	rt all string	s set in w	ell)			
28. CASING SIZE	WEIGHT, LB.		SET (MI		E SIZE		CEMENT	ING RECORD		AMOUNT PULLED
7H	20#		119'	9	**		10 sec	ks	:	Hone
4ån	9.5#	 i	8501	5-5/8	94		35 sac	ks		Nerre
	7.3		<u> </u>							
					-	1				1 2 2 2
29.		LINER REC	ORD		13 D 15	30	·	TUBING	RECORD	
SIZE	TOP (MD)	воттом (м	D) SACK	S CEMENT*	SCREEN (M		SIZE	DEPTH 8		PACKER SET (MD)
		None			5 3	2-	3/8"	85	3.	
				11 1	ੋ a				-	
31. PERFORATION REC	ORD (Interval, s	ize and numb	机厂	111-W	82,	ACID,	SHOT, FR	ACTURE, CE	MEN'S KAI	EMELTYCI
			KLUL	17 LU	DEPTH IN	TERVAL (MD)	AMOUNT AN	D KIND OF	MATERIAL USED
		- 1						None	M	AY 1 5 1969
			MAY 1	6 1969					<u> </u>	
		1	Hills -	-014	1			<u> </u>	-11 s a	OLOGICAL SURVEY
			OIL CE	N. COM.					FARA	AINGTON, N. M.
33.*				ST. 3PR	OUCTION				WINT COMAIN	us (Producing or
DATE FIRST PRODUCT		UCTION METH	od (Flowin	ig, gae lift, p	umping—size	апа туре	oj pump)		shut-in)	
5-2-69		Pumping				<u> </u>				GAS-OIL BATIO
DATE OF TEST	HOURS TESTED	CHOKE		ROD'N. FOR EST PERIOD	OIL—BBL.	-1	GAS-MCF.	1.44	R—BBL.	GAS-OIL BAILO
5-3-69	24	-			10_			2		GRAVITY-API (CORR.)
FLOW. TUBING PRESS.	CASING PRESSU	RE CALCULA 24-HOUR	ATED C	IL—BBL.	GAS-	-MCF.	W A	TER-BBL.		
None	-		<u>→ </u>	-	1			mpen	WITNESSED	30
34. DISPOSITION OF G	AS (Sold, used fo	or fuel, vented,	, etc.)					TEST	TITHEODED.	
		<u>.</u>						1	•	
35. LIST OF ATTACH	MENTS									
36. I hereby certify	and make a 1 - SIMALI	A	had inform	ation to com	lete and me	rect as d	etermined t	from all avai	lable record	ls
36. I hereby certify			ned intolu	ation is com	255	かい ほうかたい	J.J. Mandell			
SIGNED	M.C. MIS	1		TITLE _	Opera	tor			DATE)-14-0Y
SIGHED					<u> </u>			"5	and the second second	and the second to the second

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NO. OF COPIES RECEIVED	1	$\sim \Lambda$	
DISTRIBUTION	NEW MEXICO OIL CONSERVATION COM	AMISSION / Form C-104	
SANTA FE /	REQUEST FOR ALLOWABLE		nd C-110
FILE / L	AND	Effective 1-1-65	
U.S.G.S.	AUTHORIZATION TO TRANSPORT OIL AND	NATURAL GAS	
LAND OFFICE	AGTION EXTROR TO TRAINE ON THE		
TRANSPORTER OIL / GAS		OF!	
OPERATOR /	1		<i>t</i> ,
PRORATION OFFICE	1		14
Reason(s) for filing (Check proper box, New Well Recompletion	t, Farmington, New Mexico - 87401 Change in Transporter of: Oil Dry Gas	ase explain) MAY 1 5 1959 OH. 53N. COM DIST. 3	
Change in Ownership If change of ownership give name and address of previous owner DESCRIPTION OF WELL AND	Casinghead Gas Condensate LEASE Well No. Pool Name, Including Formation	Kind of Lease 1-89-IND-58	
		T_OÀ_TEN_DO	e No.
Lease Name Navaje 18	6 Hogback-Daketa	State, Federal or Fee	e No.

OH, GOM. COM. DIST. 3 Lease No. ND-58 est line County Line of Section 15 Township Cymort III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Oil 🔳 or Condensate Box 3119, Midland, Texas The Permian Corporation Name of Authorized Transporter of Casinghead Gas _____ or Dry Gas ____ Address (Give address to which approved copy of this form is to be sent) When Unit Sec. **18** Is gas actua
No-TSTM If well produces oil or liquids, give location of tanks. 16W 291 If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Workover Same Res'v. Diff. Res'v. New Well Deepen Oil Well Gas Well Plug Back X Designate Type of Completion - (X) I P.B.T.D. Date Compl. Ready to Prod. Total Depth Date Spudded 8651 2-28-69 3-6-69 Tubing Depth Elevations (DF, RKB, RT, GR, etc.) e of Producing Formation Top Oil/Gas Pay 8581 8631 5173' Gr. Dakota Depth Casing Shoe Perforations TUBING, CASING, AND CEMENTING RECORD DEPTH SET SACKS CEMENT CASING & TUBING SIZE HOLE SIZE 119 20 10 sacks 8501 447 9.5# 35 saoks 5-5/8" <u>2-3/8</u>* 8581 (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) V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL Producing Method (Flow, pump, gas lift, etc.) Date of Test Date First New Oil Run To Tanks 5-3-69 Pumping 5-2-69 Choke Size Casing Pressure Tubing Pressure Length of Test 24 hours None Gas - MCF Water - Bbls. Oil-Bbls. Actual Prod. During Test 10 None 10 Bbls.

GAS WELL			
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Actual Flod. 1881-Mol/2			
	(-) (-)	Casing Pressure (Shut-in)	Choke Size
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Cdaing Pressure (SMCC-14)	0
}			

TITLE

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.

> ORIGINAL SIGNED W. C. 1800

(Signature)
operator
(Title)
mm 15, 1969
(Date)

OIL	CONSERV	ATION	COMMISSION
\smile	COMPLIA		001111111001011

MAY 1 5 1969

APPROVED. By Original Signed by Emery C. Arnold

SUPERVISOR DIST. TS

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.