NO. OF COPIES REC	S		
DISTRIBUTIO			
SANTA FE		/	
FILE		1	
U.S.G.S. LAND OFFICE			
TRANSPORTER	OIL		
	GAS	1	
OPERATOR		2	
PRORATION OFFICE			

Ī	DISTRIBUTION	NEW MEXICO OIL CO	NSERVATION COMMISSION	Form C-104						
Ī	SANTA FE /		OR ALLOWABLE	Supersedes Old C-104 and C-110						
	FILE /		AND	Effective 1-1-65						
[U.S.G.S.	AUTHORIZATION TO TRAN	SPORT OIL AND NATURAL (GAS						
	LAND OFFICE	1								
	TRANSPORTER OIL									
Į	GAS 1									
	OPERATOR 2	4								
1.	PRORATION OFFICE	<u> </u>								
	Operator P&C Dnilling (Tompanir								
	R&G Drilling Company									
- 1	Address PO Box 254									
	c/o Walsh Engr.&Prod. Corp. Farmington. NM 87401 Reason(s) for filing (Check proper box) Other (Please explain)									
	New Well Change in Transporter of:									
	Recompletion	Oil Dry Gas								
	Change in Ownership	Casinghead Gas Condens	7							
	Change in Ownership Cashighed Gas Gondensate									
	If change of ownership give name									
and address of previous owner										
TT	DESCRIPTION OF WELL AND	TEASE								
11.	Lease Name	Well No. Pool Name, Including Fo		1 (-1)						
	Hardie	62 Fulcher Kutz	P.C. State, Feder	alor Fee Federal 077710						
	Location									
	P . 9	35 Feet From The South Line	and 1.010 Feet From	The East						
	Unit Letter;;	7 <u>7</u> 1 66(1 10m 1 mc 2 mc 2 mc								
	Line of Section 14 To	ownship 29N Range	12W , ммрм, Sa	n Juan County						
III.	DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL GAS	S							
	Name of Authorized Transporter of O.	l or Condensate	Address (Give address to which appro	oved copy of this form is to be sent)						
	none									
	Name of Authorized Transporter of C	usinghead Gas Or Dry Gas X	Address (Give address to which appro							
	El Paso Natur		PO Box 990, Farmin							
	If well produces oil or liquids,	Unit Sec. Twp. Rge.		nen						
	give location of tanks.		NO	Unknown						
	If this production is commingled w	ith that from any other lease or pool,	give commingling order number:							
IV.	COMPLETION DATA			In part Company Dutt Books						
	Designate Type of Complet		New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.						
	Designate Type of Complete		X	P.B.T.D.						
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	1885*						
	1-5-77	1-15-77 Name of Producing Formation	1970 Top Oil/Gas Pay	Tubing Depth						
	Elevations (DF, RKB, RT, GR, etc.)	Pictured Cliffs	1 *	1791						
	5717 KB	Fictured Cilis	1773	Depth Casing Shoe						
	1773'-1786',1790'-1794',1842'-1851'.									
	TUBING, CASING, AND CEMENTING RECORD									
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT						
	12 ¹ / ₄	8-5/8	140	1 50						
	7-7/8	1 0-5/0	1931	275						
	7=770	15	= 2/4							
		14"	1791							
	THE DAME AND REQUEST			l and must be squal to or exceed top allow-						
	able for this depth or be for full 24 hours)									
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas	life, eye)						
				Maria State Company						
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size						
				1 1977						
	ictual Prod. During Test	Oil-Bbls.	Water - Bbls.	OIL CON COM.						
				DIST: 3						
	AS WELL		Table Contracts Contract	Gravity of Condensate						
	tual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate -O-						
	/4"-380,CAOF-911	3 hours	Casing Pressure (Shut-in)	Choke Size						
	iting Method (pitot, back pr.)	Tubing Pressure (Shut-in) 265	265	3/4"						
	back pressure									
	TIFICATE OF COMPLIA	NCE	OIL CONSERV	ATION COMMISSION						
		APPROVED								
	by certify that the rules an	d regulations of the Oil Conservation	ALL ROYED							
ssion have been complied with and that the information given is true and complete to the best of my knowledge and belief.		BY ORIGINAL STONED BY N. E. WAAWELL, JR								
or: R&G Drilling Company			PERSONERS IN LANGUE TO THE RESIDENCE OF THE RESIDENCE OF THE PERSON OF T							
TITLE			TITLE							
1 N. Walsh, (Signature) P.E., President tests 2 Engr. & Production Corporation			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.							
						(Title)				
							F <u>eb</u> ru:	ary 10, 1977	Fill out only Sections I.	II, III, and VI for changes of owner,
								(Date)	well name or number, or transp	orter, or other such change of condition.

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.