i.s.c.s.	AUTHORIZATION TO TRAN	SPORT OIL AND NATURAL (	5Å\$
AND OFFICE OIL		[mage	
RANSPORTER GAS		. 2	
PROPATION OFFICE			141933 LAN 141933
	ompany, Division of Atlant	cic Richfield Company	
Afrest	nver, Colorado 80217		DIL CON. DIV.
eason(s) for filing (Check proper box)	iiver, colorado 3021.	Other (Please explain)	
lew Well	Change in Transporter of:		·
Recompletion Change in Ownership	Ost Dry Gas  Castinghead Gas X Condens		
change of ownership give name ad address of previous owner			,
ESCRIPTION OF WELL AND I	EASE		
ense Name	Well No. Fool Name, including Fool	1	Lecse No. clorFee State E-7122
State A Com	TE   Dasin baketa		
Unit Letter E : 1850	Feet From The North Line	and 800 Feet 7:0m	The West
Line of Section 36 Tow	mship 29N Range	11W , NMPM. S	San Juan County
SESTENATION OF TRANSPORT	TER OF OIL AND NATURAL GAS	S	
Name of Authorized Transporter of Oil	ar Condensate	Accress (Give address to which appro	oved copy of this form is to be sent)  1, Farmington, N M 87401
Plateau, Inc. Name of Authorized Transporter of Cas	Inghead Gas or Dry Gas	Address (Give address to which appro	oved copy of this form is to be sent)
Southern Union Gathering	g Company	1st International Bldg., Dallas, Texas 75270	
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. P.ge. 1 E   36   29N   11W	Yes	
this production is commingled wit COMPLETION DATA	h that from any other lease or pool, a		Plug Back   Same Resty, Diff. Resty
Designate Type of Completion	on - (X)   Oil Well   Gas Well	New Well Workever Deepen	Plug Back Same Res'Y. Ditt. Res'Y
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
12-31-81 Elevations (DF, RKB, RT, GR, etc.)	2-2-82 Name of Producing Formation	6630' Top 04/Gas Pay	6561 Tubing Depth
5679'GL:5690'DF'5691'KB	Dakota	6526'	6473 Depth Casing Shoe
Perferences Dakota 6526' - 65	36'		6629'
Date Cd 0320	TUBING, CASING, AND	CEMENTING RECORD	SACKS CEMENT
HOLE SIZE 12-1/4"	CASING & TUBING SIZE	DEPTH SET   475	340 sx
7-7/8"	5-1/2"	6629'	1129 sx 2 stages
	2-3/8"	6473'	
TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a	feer recovery of total volume of load o pik or be for full 24 hours)	il and must be equal to or exceed top allow
OIL WELL  Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas	lift, etc.)
		Casing Pressure	Choke Size
Length of Test	Tubing Pressure		
Actual Proc. During Test	Cil-Bbis.	Weter - Bbls.	Gas-MCF
	·		
GAS WELL Actual Prod. Test-MCF/D	Length of Test	Shis. Condensets/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (Shat-in)	Casing Pressure (Shut-in)	Cnoze Size
CERTIFICATE OF COMPLIAN	CE	OIL CONSER	VATION COMMISSION
cindea have hern complled	regulations of the Oil Conservation with and that the information given	Original Signed by	
above is true and complete to the best of my knowledge and belief.		TITLE DEPUTY OIL & GAS INSPECTOR, DIST #3	
4/10 2/		This form is to be filed in compliance with RULE 1104.	
Ph Fline		If this is a request for allowable for a newly drilled or deepene 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 allow	
K. L. Flinn (Signature) Operations Information Assistant			
(Title)		able on new and recompleted	Wells.  II. III. and VI for changes of owner
January 11, 1983	)c:ej	Fill out only Sections I. U. 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 multiple	
Separate For completed wells.			were or reson to each book to number