	DISTRIBUTION ANT A FE FILE U.S.G.S. LAND OFFICE IRANSPORTER GAS	REQUE	L CONSERVATION COMMISSION ST FOR ALLOWABLE AND FRANSPORT OIL AND NATURA	Form C+104 Supersedes Old C-104 and C-11 Effective 1-1-65 L GAS	
1.	OPERATOR / PRORATION OFFICE Operator		· .		
	Mitchell Energy Corp	oration			
	3900 One Shell Plaza, Houston, Texas 77002 Reason(s) for filing (Check proper box) Other (Please explain)				
	New Well	Change in Transporter of:	Other (Please explain)		
	Recompletion	OII Dry	y Gas 🔲 Remain shut-i	n	
	Change in Ownership X	Casinghead Gas Co	ndensate		
	If change of ownership give name and address of previous owner	Dyna Ray Oil and Ga	as Company, 4101 East Lo	uisiana Avenue, Denver, Colo	
11.	DESCRIPTION OF WELL AND I	Well No. Pool Name, Includir	ng Formation Kind of L	ease Lease No.	
	Rosa Wait	48 Basin Dako	ta Stole, Fed	deral or Fee Federal SF 078762	
	Location Unit Letter 0 : 11	80 Feet From The South	Line and 1850 Feet Fr	om The East	
	Line of Section 11 Tow	mship 31N Range	5W , NMPM,	Rio Arriba County	
111.	Name of Authorized Transporter of Oil Name of Authorized Transporter of Cas	or Condensate	Address (Give address to which ap Address (Give address to which ap	proved copy of this form is to be sent) proved copy of this form is to be sent) When	
	If well produces oil or liquids, give location of tanks.				
	If this production is commingled wit COMPLETION DATA	h that from any other lease or po	ool, give commingling order number:		
•••	Designate Type of Completic	Oil Well Gas Well	ll New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.	
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
	10-25-62	4-11-64	8295'	8265 '	
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
	66081 GL	Basin Dakota		8206 Depth Casing Shoe	
	8165-8175; 8210-8219	; 8244-8260			
		T	AND CEMENTING RECORD		
	HOLE SIZE	CASING & TUBING SIZE	230 t	SACKS CEMENT 150	
	9-7/8"	7-5/8"	4200'	250	
	6-3/4"	5-1/2"	8266'	507	
	(4-3/4"	2-3/8"	82061		
V.	TEST DATA AND REQUEST FO		be after recovery of total volume of load is depth or be for full 24 hours)	oil and must be equal to or exceed top allow-	
	OII. WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, ga	s lift, etc.)	
	Length of Test	Tubing Pressure	Casing Pressure	Choke Sze	
	Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	Gas-OF AUG \$ 1876	
	GAS WELL	1		DIL WALL COM	
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Cond	

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.

8.5.76 (Tule)

3 hrs.

Tubing Pressure (Shut-in)

2919 Flowing

Gauged 3460 MCF

Testing Method (pitot, back pr.)

Gauge

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OIL CONSERVATION COMMISSION

Choke Size

3/4"

Casing Pressure (Shut-in)

2919

FI CT DUY	/b, 19
Signe: by A.	H. Kendrick
rand ISOB DISE	#3
	Signe: by A.

This form is to be filed in compliance with MULE 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.

Panarata Roma C-104 must be filed for each next in multintu