	NO. OF COPIES REC	EIVEO	4	1					
	DISTRIBUTIO	ЭN					NE	W MEX	CO OIL
	SANTA FE		/						REQUEST
	FILE			4					
	U.S.G.S.					AUT	HORIZ	ATIO	N TO TR
	LAND OFFICE								
	TRANSPORTER	OIL GAS	1						
1	OPERATOR		1	-					
ı.	PRORATION OF	FICE	 						
•	Operator								·····
	Energy Ro	eserv	<u>zeş</u>	Gr	ou	p, I	nc.		
	P. O. Box	x_328	30,	Ca	sp	er.	Wyor	ning	8260
	Reason(s) for filing	(Check p	roper	box)					4
	New Well	H				-	in Tra	1sporte	
	Recompletion	H				Oil		\vdash	Dry C
	Change in Ownership	<u> </u>				Casing	head Ga	is	Cond
	If change of owners and address of prev								
	DESCRIPTION O				ÆA	SE			
	Lease Name				_	Well N	1		Including
	N.E.Hogb	ack I	Inii	-		33	Но	rse	shoe (
	Location								
	Unit Letter	K	:	212	0	_ Feet F	rom Th	e	South
	Line of Section	11		Tow	nshij	, 3	ON	 , – –	Range
11.	DESIGNATION O	F TRÁ	NSP	ORT	ER	of or	L ANI	D NAT	TURAL G
	Name of Authorized	Transpo	rter of	011	\mathbf{X}	or	Conder	isate [
	Giant Ind	Authorized Transporter of Oil X authorized Transporter of Casino a	In	Inc.					
					<u></u>				
	If well produces oil give location of tank	or liquid	8,		Uni			¦Twp. ¦3∩N	P.ge.
	If this production i		ngled	l with					
	COMPLETION D						TOIL We		Gas Well
	Designate Ty	ne of C	ompl	etio	n	(X)	OH WE	:11	Gas well
	Date Spudded					e Compl	. Ready	to Pro	d.
	Elevations (DF, RK	B. RT. G	R et		Nan	ne of Pro	oducing	Format	ion
	Perforations								
	HOLE	S17 E				CASII			<mark>asing, ai</mark> 3 size
	HOLL	3122							
V.	TEST DATA AN	D REQ	UES?	rFC	RA	ILLOW	ABLE	. (Te ah	est must be le for this o
	OII, WELL Date First New Cil Run To T				Date of Test				
	Length of Test				Tub	Tubing Pressure			
	Actual Prod. During	Test			Oil	- Bble.			
	Actual Prod. During	' AB /							
	GAS WELL		_						
	Actual Prod. Test-	MCF/D	*		Len	igth of T	est		
	Testing Method (pit	ot, back	pr.)		Tub	ing Pre	***** (1	Shut-1	n)
					<u> </u>				

(Title)

3/25/76

CONSERVATION COMMISSION FOR ALLOWABLE

Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65

FILE	4	AND	Fuection 1-1-02				
U.S.G.S.	AUTHORIZATION TO TRA	ANSPORT OIL AND NATURAL G	AS				
LAND OFFICE	-						
TRANSPORTER GAS							
OPERATOR	7						
PRORATION OFFICE							
Diperator —	_						
<u>Energy Reserves (</u>	Group, Inc.						
	Casper, Wyoming 8260	.1					
P. O. Box 3280, (Reason(s) for filing (Check proper bo	sasper, wyoming ozou	Other (Please explain)					
New We!!	Change in Transporter of:	— Name change fr	om Clinton Oil Co.				
Recompletion	Oil Dry Go	is	om officen off oo.				
Change in Ownership	Casinghead Gas Conden	nsate					
change of ownership give name							
nd address of previous owner							
ESCRIPTION OF WELL ANI) LEASE						
ease Name	Well No. Pool Name, Including Fo		, -				
N.E.Hogback Unit	33 Horseshoe G	allup State, Federal	or Fee Federal NM04443				
Location	120 South	1830 Feet From T	Wost				
Unit Letter K : 2.	120 Feet From The South in	re and Feet From T	he West				
Line of Section 11 T	ownship 30N Range	16W NMPM, San	Juan county				
Line of Section							
ESIGNATION OF TRANSPO	RTER OF OIL AND NATURAL GA	ıs					
Name of Authorized Transporter of C		Address (Give address to which approv					
Giant Industries	, Inc.	Box 256, Farmingto	n. N.M. 87401				
Name of Authorized Transporter of C	asingheda Gas of Diy Gas	Address (byte dadress to which approv	ea copy of this form to to be com,				
	Unit Sec. Twp. P.ge.	Is gas actually connected? Whe	n				
If well produces oil or liquids, give location of tanks.	P 10 30N 16W	No					
this production is commingled to	with that from any other lease or pool,						
COMPLETION DATA							
Designate Type of Complet	ion - (X)	New Well Workover Deepen	Plug Back Same Restv. Diff. Res				
	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.				
Date Spudded	Date Compi. Reday to Piou.	Total Baptin					
Elevations (DF, RKB, RT, GR, etc.	Name of Producing Formation	Top Oil/Gas Pay	Thier Death				
		RLUL	13 800 /				
Perforations			Depth Casing Shoe				
		MAR 2	p 19/0				
	CASING & TUBING SIZE	D CEMENTING RECORD	N. CONSACKS CEMENT				
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET OIL	- 2/				
		<u> </u>	<u> </u>				
TEST DATA AND REQUEST	FOR ALLOWABLE (Test must be a	ifter recovery of total volume of load oil a epth or be for full 24 hours)	and must be equal to or exceed top all				
OIL WELL Date First New Cil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lif	t, etc.)				
Date First New Cil Run 10 I daks	Date of Year						
Length of Test	Tubing Pressure	Casing Pressure	Choke Size				
Actual Prod. During Test	Oil-Bble.	Water - Bbis.	Gas-MCF				
GAS WELL Actual Prod. Teet-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate				
Actual Floa, 1881* MCF/D							
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size				
and the second s							
ERTIFICATE OF COMPLIA	NCE	OIL CONSERVATION COMMISSION					
hereby certify that the rules an	d regulations of the Oil Conservation	BY ORIGINAL SIGNED BY N. F. MAXWELL, IR:					
taincide hove been complied	with and that the information given the best of my knowledge and belief.						
		* * * * * * * * * * * * * * * * * * *	273 - 3 T 21 44				
_		TITLE PRIROLEUM FMG					
—	1 1/0	This form is to be filed in c	compliance with RULE 1104.				
benence !	enature)	II at able form must be accompai	able for a newly drilled or deeper nied by a tabulation of the deviat				
• • • • • • • • • • • • • • • • • • • •	inerma/	tests taken on the well in accor	dance with RULE 111.				
District Clerk		All sections of this form mu	et be filled out completely for all				

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.