| HO. OF COPIES RECEIVED   |  |                             |                     |   | /                |
|--|--|-----------------------------|---------------------|---|------------------|
| DISTRIBUTION   |  |                             |                     | /   |                  |
| SANTA FE   | NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE |                             |                     | Form C-104 Supersedes Old C-104 and C-116 |                  |
| FILE   | REQUEST  | AND                         |                     | Effective 1-1-65                          |                  |
| U.S.G.S.   | AUTHORIZATION TO TRA   | =                           | NATUDAL CAS         | •   |                  |
| LAND OFFICE  | AUTHORIZATION TO TRA   | ANSPURT UIL AND             | NATURAL GAS         | •   |                  |
| TRANSPORTER GAS  |  |                             |                     |   |                  |
| OPERATOR 2   |  |                             |                     |   |                  |
| PRORATION OFFICE   |  |                             |                     | ·   |                  |
| ENGINEERING & P  | RODUCTION SERVICE, 1   | INC.                        | <del></del>         |   |                  |
| P. O. Box 190: Reason(s) for filing (Check proper box)           | Farmington, New Mexi   | co 87401                    | e explain)          |   |                  |
| New Well   | Change in Transporter of:                                    | , ,,,,,,                    |                     |   |                  |
| Recompletion   | OII Dry Go   | as [                        |                     |   |                  |
| Change in Ownership X  | Casinghead Gas Conde   | nsate                       |                     |   |                  |
| If change of ownership give name and address of previous owner A | SSOCIATED ROYALTY CO   | ).; 1105 Unit               | ed Bank C           | enter, Denv                               | er, Colo         |
| I. DESCRIPTION OF WELL AND I                                     | EASE   |                             |                     |   | <b>———</b>       |
| Lease Name Navajo Tribe  | Well No. Pool Name, Including F                              | `ormation                   | Kind of Lease       | 77 1 1                                    | 1 4-20-60        |
| of Indians "C"   | 201 Horseshoe  | Gallup                      | ! State, Federal or | Fee Federal                               | 2033             |
| Unit Letter N ; 500  | Feet From The south Lin                                      | ne and1980                  | Feet From The       | west                                      |                  |
| Line of Section 11 Tow   | nship 31N Range  | 17W NMP                     | . Sa                | n Juan                                    | County           |
| 1. DESIGNATION OF TRANSPORT                                      | ER OF OIL AND NATURAL GA                                     | AS                          |                     |   |                  |
| Name of Authorized Transporter of Oil                            | X or Condensate  | Address (Give address       |                     |   |                  |
| Shell Pipeline Corp  |  | Bx. 1588; Fa                |                     |   |                  |
| Name of Authorized Transporter of Cas                            | inghead Gas or Dry Gas                                       | Address (Give address       | to which approved   | copy of this form is to                   | be sent)         |
| If well produces oil or liquids, give location of tanks.         | Unit Sec. Twp. P.ge. <b>F</b> 10 31 17                       | Is gas actually connec      | ed? When            |   |                  |
| If this production is commingled with V. COMPLETION DATA         | h that from any other lease or pool,                         | give commingling orde       | r number:           |   |                  |
|  | Oil Well Gas Well  | New Well Workover           | Deepen P            | lug Back Same Res                         | v. Diff. Restv.  |
| Designate Type of Completio                                      | n - (X)  | <u> </u>                    |                     | <u> </u>                                  | !                |
| Date Spudded   | Date Compl. Ready to Prod.                                   | Total Depth                 | P                   | P.B.T.D.                                  |                  |
| Elevations (DF, RKB, RT, GR, etc.,                               | Name of Froducing Fermation                                  | Top Oil/Gas Pay             | Т                   | ubing Depth                               |                  |
| Perforations   |  |                             | D                   | epth Casing Shoe                          |                  |
|  | TUBING, CASING, AN   | D CEMENTING RECO            | RD                  |   |                  |
| HOLE SIZE  | CASING & TUBING SIZE   | DEPTH S                     | 1                   | SACKS CEM                                 | ENT .            |
|  |  |                             |                     |   |                  |
|  |  |                             |                     |   |                  |
|  |  |                             |                     | <del></del>                               |                  |
| /. TEST DATA AND REQUEST FO                                      | OR ALLOWABLE (Test must be a                                 | ifter recovery of total vol | ume of load oil and | must be equal to or e                     | cceed top allow- |
| OIL WELL   | able for this de   | epth or be for full 24 how  | s)                  |   |                  |
| Date First New Oil Bun To Tanks                                  | Date of Test   | Producing Method (Flo       |                     | <u> </u>                                  |                  |
| Length of Test   | Tubing Pressure  | Casing Pressure             |                     | Choke Size                                |                  |
| Actual Prod. During Test   | Oll-Bbis.  | Water - Bbls.               | G                   | Gae - MCF                                 |                  |

**GAS WELL** 

Actual Prod. Test-MCF/D

Testing Method (pitot, back pr.)

I. CERTIFICATE OF COMPLIANCE

Length of Test

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.

Production

(Title)

1-30-75 (Date)

Tubing Pressure (Shut-in)

President

Service, Inc.

Colo.

1 4-20-603-

OIL CONSERVATION COMMISSION FEB 6 APPROVED ... By Original Signed by Emery C. Arno16 SUPERVISOR DIST. #3 TITLE

Gravity of Condensate

1974

Choke Size

This form is to be filed in compliance with RULE 1104. J. D. Hicks

Bbls. Condensate/MMCF

Casing Pressure (Shut-in)

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.