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DISTRIBUTION			
SANTA FE			
FILE			
J.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR		<u> </u>	L
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NEW MEXICO OIL CONSERVATION COMMISSION

	SANTA FE	REQUEST F	FOR ALLOWABLE	Supersedes Old C-104 and C-1 Effective 1-1-65	
	J.S.G.S.	AUTHORIZATION TO TRAI	AND NSPORT OIL AND NATURAL G		
	LAND OFFICE		NO ON TOLL AND NATURAL O	^3	
	TRANSPORTER GAS				
	OPERATOR				
1.	PRORATION OFFICE Operator				
	SOLAR PETRO				
Address					
	Reason(s) for filing (Check proper box) Other (Please explain)				
	New Well	Change in Transporter of:			
	Recompletion Change in Ownership XX	Oil Dry Gas Casinghead Gas Condens			
					
	If change of ownership give name and address of previous owner	HICKS ENCO, INC., BOX 174	4, FARMINGTON, NEW MEXIC	0 87401	
**	DESCRIPTION OF WELL AND I	FASE			
11.	Lease Name NAVAJO TRIBE	Well No. Pool Name, Including Fo	S	1 4-20-60	
	OF INDIANS "F"	113 HORSESHOE-GA	LLUP Sidie, Pederd.	or Fee FEDERAL 1 2034	
		O Feet From The South Line	and 530 Feet From T	_{he} East	
	0 -	23 N	17W , NMPM, SAN J	IIAN	
	Line of Section 9 Tow	mship JIN Range	, IMPM, OTHER	UAIN County	
Ш.	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GAS	S Address (Give address to which approv	ed copy of this form is to be sent!	
	Name of Authorized Transporter of Oil SHELL PIPELINE CORP.	AA) of Condensate	BOX 1588, FARMINGTON,		
	Name of Authorized Transporter of Cas	inghead Gas or Dry Gas	Address (Give address to which approv	ved copy of this form is to be sent)	
		Unit Sec. Twp. Ege.	Is gas actually connected? Whe	en .	
	If well produces oil or liquids, give location of tanks.	F 10 31 17			
	If this production is commingled wit	th that from any other lease or pool,	give commingling order number:	•	
IV.	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'	
	Designate Type of Completic		<u> </u>	P.B.T.D.	
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.1.D.	
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
	Perforations	<u> </u>		Depth Casing Shoe	
	Periorations				
	TUBING, CASING, AND CE		DEPTH SET	SACKS CEMENT	
	HOLE SIZE	CASING & TUBING SIZE	DEFF ACT		
		1			
V.	. TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a	fier recovery of total volume of load oil pth or be for full 24 hours)	and must be equal to or exceed top allo	
	OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas li	fs, etc.)	
				Choke Size	
	Length of Test	Tubing Pressure	Casing Pressure	Chore size	
	Actual Prod. During Test	Oil-Bbls.	Water Bbls.	Gas-MCF	
			JUL 2 1 1980		
	GAS WELL OIL SOME COM.				
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Codens and MMCB	Gravity of Condensate	
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Cosing Pressure (Shut-in)	Choke Size	
VI	. CERTIFICATE OF COMPLIAN	CE	OIL CONSERVA	TION COMMISSION	
	T handy contify that the rules and	regulations of the Oil Conservation	APPROVED		
	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.		Original Signed by FRANK T. CHAVEZ		
			SUPERVISOR DISTRICT 第3		
			This form is to be filed in compliance with RULE 1104.		
	(Signature) Vice President		If this is a request for allowable for a newly drilled or deepen well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.		
	SOLAR PETROLEUM. INC.	ille)	All sections of this form must be filled out completely for allo able on new and recompleted wells. Fill out only Sections I, II, III, and VI for changes of own well name or number, or transporter, or other such change of conditi		
	July 1, 1980				
	(D	ate)	Canada Forma Calla min	at he filed for each need in multi-	