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LAND OFFICE	
TRANSPORTER	OIL 1 GAS
OPERATOR	2
PRODUCTION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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

Operator ENGINEERING & PRODUCTION SERVICE, INC.	
Address P. O. Box 190; Farmington, New Mexico 87401	
Reason(s) for filing (Check proper box) (Other if lease explain)	
New Well ☐	Change in Transporter oil: ☐
Recompletion ☐	Oil ☐ Dry Gas ☐
Change Ownership ☒	Casinghead Gas ☐ Condensate ☐

If change of ownership give name and address of previous owner **ASSOCIATED ROYALTY CO.; 1105 United Bank Center, Denver, Colo. 80202**

II. DESCRIPTION OF WELL AND LEASE

Lease Name Navajo Tribe of Indians "F"	Well No. 122	Pool Name, including Formation Horseshoe Gallup	Kind of Lease Federal	Lease No. 14-20-603-2034
Location				
Unit Letter H	1980	Feet From The north Line and 660	Feet From The east	
Line of Section 9	Township 31N	Range 17W	NMPM, San Juan	County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐	Address (Give address to which approved copy of this form is to be sent)
Shell Pipeline Corp.	Bx. 1588; Farmington, New Mexico 87401
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)
It well produces oil or liquids, give location of tanks:	Unit F Sec. 10 Twp. 31 Rge. 17

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	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.					
Elevations (D.P., H.A., N.T., G.R., etc.)	Name of Producing Formation	Top of Gas Pay	Testing Depth					
Perforations			Depth Casing Shoe					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)

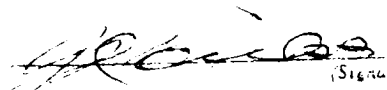
Flow Rate New Oil (Bbl./Day)	Date of Test	Producing Method (Pump, pump, gas lift, etc.)
Length of Test	Flowing Pressure	Casing Pressure
Actual Prod. During Test	Choke Size	Gas - MCF

GAS WELL

Actual Prod. During Test (MCF)	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (pilot, back prod.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

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.


J. D. Hicks
President
Engineering & Production Service, Inc.
Title
1-30-75
(Date)

OIL CONSERVATION COMMISSION
FEB 6 1974

APPROVED
BY Original Signed by Emery C. Arnold
SUPERVISOR DIST. #5
TITLE

This form is to be filed in compliance with RULE 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.
Separate Forms C-104 must be filed for each pool in multiply completed wells.