	NO. OF COPIES RECEIVED				
	DISTRIBUTION SANTA FE	_	CONSERVATION COMMISSION TOR ALLOWABLE AND	Form C-104 Supersedes Old C-104 and C-116 Ellective 1-1-65	
	U.S G.S.	AUTHORIZATION TO T	RANSPORT OIL AND NATURAL	GAS	
	LAND OFFICE		THE STATE AND THE ORALL		
	TRANSPORTER OIL GAS	*		•	
	OPERATOR /			•	
1.	PRORATION OFFICE	<u> </u>			
	Hicks Enco, Inc.				
		2313 Santiago Avenue, Farmington, NM 87401 esson(s) for filing (Check proper box) Other (Please explain)			
	New Well	Change in Transporter of:			
	Recompletion	Oil Dry	Gas [
Change in Ownership X Casinghead Gas Condensate					
	If change of ownership give name and address of previous owner		ion Service, Inc., Box 19	0, Farmington, NM 87401	
II.	DESCRIPTION OF WELL AND	Well No. Pool Name, Including	Formation Kind of Leas	lagae No.	
	Lease Name Navajo Tribe		State Federa	14-20-60	
	of Indians "F"	1133 Horseshoe	Gallup January	Federal 2034	
	Unit Letter D ; 660 Feet From The North Line and 660 Feet From The West				
	Line of Section 9 To	wnship 31N Range	17W , NMPM, San	Juan County	
m.	DESIGNATION OF TRANSPOR	or Condensate	Address (Give address to which appro-		
	Shell Pipeline Corp.		Box 1588, Farmington,	NM 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)		
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Pge. F 10 31 17	Is gas actually connected? When		
	f this production is commingled with that from any other lease or pool, give commingling order number:				
	Designate Type of Completion		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 (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
	Perforations			Depth Casing Shoe	
	TUBING, CASING, AND CEMENTING RECORD				
- {	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
- }					
	EST DATA AND REQUEST FOR ALLOWABLE (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)				
ĺ	Date First New Oil Run To Tanks Date of Test Proc		Producing Method (Flow, pump, gas lift, etc.)		
ŀ	Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
ł	Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	Gas-MCF	
ι,	GAS WELL MAR 12 1979				
ſ	Actual Prod. Test-MCF/D	Length of Test	Bble. Condensate/MMCF	Gravity & Hondahalila COM.	

3 Casing Pressure (Shut-12) Choke Size OIL CONSERVATION COMMISSION 19 .

T. CERTIFICATE OF COMPLIANCE

Testing Method (putot, back pr.)

I hereby certify that the rules and regulations of the Oil Conservation Commission have been compiled with and that the information in the conservation of the conservation of the conservation of the Oil Conservation of the Commission have been compiled with and that the information given above is true and complete to the best of my knowledge and belief.

dack D. Cook (Signature)

Engineering & Production Service, Inc

(Date)

February 26, 1979

Tubing Pressure (Shut-is)

APPROVED Original Signed by FRANK T. CHAVEZ

DEPUTY OIL & GAS INSPECTOR, DIST. 43

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.