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

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

Operator Associated Royalty Company		
Address 1105 United Bank Center; Denver, Colorado 80202		
Reason(s) for filing (Check proper box)		Other (Please explain)
New Well ☐	Change in Transporter of:	
Recompletion ☐	Oil ☐	Dry Gas ☐
Change in Ownership ☒	Casinghead Gas ☐	Condensate ☐

If change of ownership give name and address of previous owner
Humble Oil & Refining
P. O. Box 1600; Midland, Texas 79701

II. DESCRIPTION OF WELL AND LEASE		Lease No.	Lease No.
Lease Name Navajo Tribe of Indians F	Well No. 110	Well Name, including Formation Horseshoe Gallup	Kind of Lease State, Federal or Fee Federal
Location		14-20-603 2034	
Unit Letter M	560	Feet from The south	Line and 660
Line of Section 3	Township 31N	Range 17W	County San Juan

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)	
Steel Pipe Line		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.	Is gas actually transported? When
	F	10	31	17	

If this production is commingled with 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 Resv.	Diff. Resv.
Designate Type of Completion - (X)									
Date Spudded	Date Compl. Ready to Prod.	Total Depth		F.B.T.D.					
Elevations (L.F., R.H., RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay		Timing 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 lead oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-Bbls.

GAS WELL		Bbls. Condensate (MMCF)	Gravity of Condensate
Actual Prod. Test (Mcf)	Length of Test		
Testing Method (pump, 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
(Signature)
President
Engineering & Production Service, Inc.
(Title)
12-31-72
(Date)

OIL CONSERVATION COMMISSION
APPROVED **DEC 29 1972**, 19____
BY **Original Signed by Emery C. Arnold**
TITLE **SUPERVISOR DIST. #3**

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.