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LAND OFFICE			
TRANSPORTER	OIL	7	
	GAS		

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DISTRIBUTION		CONSERVATION COMMISSION	Form C-104
SANTA FE /	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-11 Effective 1-1-65
U.S.G.S.	ALITHOPIZATION TO TR	AND ANSPORT OIL AND NATURAL (· · · · ·
LAND OFFICE	AUTHORIZATION TO TR	ANSPORT OIL AND NATURAL (SAS .
TRANSPORTER GAS	_		
OPERATOR 2			
PRORATION OFFICE Operator			
Address	PRODUCTION SERVICE,		
P. O. Box 190; Reason(s) for filing (Check proper b	Farmington, New Mex	ico 87401 Other (Please explain)	
New Well	Change in Transporter of:		
Recompletion	OII Dry G	≒ I	
Change in Ownership X	Casinghead Gas Conde		
<u>DESCRIPTION OF WELL ANI</u>) LEASE		Center, Denver, Colo. 80202
Lease Name Navajo Trit of Indians "F"	vell No. Pool Name, Including F		or Fee Federal 14-20-60 2034
Location			
Unit Letter J; 1	980 Feet From The southLin	ne and 1980 Feet From 1	The east
Line of Section 4 T	ownship 31N Range	17W , NMPM,	San Juan County
DESIGNATION OF TRANSPOL Name of Authorized Transporter of C	RTER OF OIL AND NATURAL GA	Address (Give address to which approx	red copy of this form is to be sent)
Shell Pipeline C	orp.	Bx. 1588; Farmington	n. New Mexico 87401
Name of Authorized Transporter of C	asinghead Gas or Dry Gas	Address (Give address to which approv	ed copy of this form is to be sent)
f well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected? Whe	n
THE LOCATION OF THE P.S.	F 10 31 17	1	
	31 1/	give commingling order number:	
this production is commingled w	with that from any other lease or pool,		
this production is commingled w	with that from any other lease or pool,	give commingling order number: New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.
this production is commingled we COMPLETION DATA Designate Type of Complet	with that from any other lease or pool,		Plug Back Same Res'v. Diff. Res'v. P.B.T.D.
this production is commingled we complet to the complet of Complet Date Spudded	ion - (X) Cil Well Gas Well Date Compl. Ready to Prod.	New Well Workover Deepen	1
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Designate Type of Complet Date Spudded Elevations (DF, RKB, RT, GR, etc.) Perforations HOLE SIZE TEST DATA AND REQUEST IDIL WELL Date First New Oil Bun To Tanks Length of Test Actual Prod. During Test GAS WELL Actual Frod. Test-MCF/D Testing Method (pitot, back pr.) ERTIFICATE OF COMPLIAN hereby certify that the rules and ommission have been complied	Cil Well Gas Well Cil Well Gas Well Date Compl. Ready to Prod. Name of Producing Formation TUBING, CASING, AND CASING & TUBING SIZE FOR ALLOWABLE (Test must be a able for this de Date of Test Tubing Pressure Cil-Bbis. Length of Test Tubing Pressure(Shut-in) (CE regulations of the Oil Conservation	Total Depth Top Oil/Gas Pay CEMENTING RECORD DEPTH SET fier recovery of total volume of load oil opth or be for full 24 hours) Producing Method (Flow, pump, gas life Casing Pressure Water-Bbls. Bbls. Condensate/MMCF Casing Pressure (Shut-in) Oil CONSERVA	P.B.T.D. Tubing Depth Depth Casing Shoe SACKS CEMENT SACKS CEMENT Choke Size Gas-MCF Gravity of Condensate Choke Size TION COMMISSIPP 6

(Signature) President Engineering & Production Service.

Inc. (Title) 1-30-75

(Date)

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.