NO. OF COPIES RECEIVED	_		. 1
DISTRIBUTION	NEW MEXICO OIL	CONSERVATION COMMISSION	Form C-104
SANTA FE	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-1.
FILE /'	<b>T</b>	AND	Effective 1-1-65
U.S.G.S.	_ AUTHORIZATION TO TR	ANSPORT OIL AND NATURAL G	SAS
LAND CFFICE	<u>-</u>		
TRANSPORTER GAS	· *	•	•
OPERATOR	7		
PRORATION OFFICE	1		
Operator .			
Hicks Enco, Inc.			
2313 Santiago Avenue Reason(s) for filing (Check proper box		Other (Please explain)	
New Well	Change in Transporter of:		
Recompletion	Oil Dry G	as T	
Change in Ownership X	Casinghead Gas Conde	ensate 🗍	
If change of ownership give name and address of previous owner	Engineering & Production	on Service, Inc., Box 190	, Farmington, NM 87401
DESCRIPTION OF WELL AND	LEASE		÷
Lease Name Navajo Tribe	Well No. Pool Name, Including F	Formation Kind of Lease	14-20-60:
of Indians "M"	304 Horseshoe Ga	allup State, Federal	
Location			<b>V</b>
Unit Letter A;	330 Feet From The North Lin	ne and 330 Feet From T	he <u>East</u>
Line of Section 5 To	wnship 31N Range	17W . NMPM, San	Juan County
DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL GA	AS	
Name of Authorized Transporter of Oi.		Address (Give address to which approv	ed copy of this form is to be sent)
Shell Pipeline Corp.		Box 1588, Farmington, N	
Name of Authorized Transporter of Ca	singhead Gas or Dry Gas	Address (Give address to which approv	ed copy of this form is to be sent)
If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected? Whe	n
give location of tanks.	1 1 1	1	
f this production is commingled wi	th that from any other lease or pool,	give commingling order number:	
COMPLETION DATA			Di Di Lo Did Ing Did
Designate Type of Completic	On - (X)	New Well Workover Deepen	Plug Back   Same Resty. Diff. Resty
		Transl Dank	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 O!l/Gas Pay	Tubing Depth
Perforations			Depth Casing Shoe
	<del></del>	D CEMENTING RECORD	CACUCCENENT
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a	fter recovery of total volume of load oil a pth or be for full 24 hows)	nd must be equal to or exceed top allow
DIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift	, etc.)
	••		Chale Str. COTILER
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bhis.	Water - Bbls.	Gas-MC 1979
	1		MAR 12 1979 OIL CON. COM.
GAS WELL			OIL CUIT 3
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Candenson 137.
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
ERTIFICATE OF COMPLIANC			TION COMMISSION 1 2 1979

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.

Engineering & Production Service,

February 26, 1979

(Date)

APPROVED. Original Signed by FRANK T. CHAVEZ DEPUTY OIL & GAS INSPECTOR, 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 silow-able on new and recompleted wells.

Fill out only Sections I. II. III, and VI for changes of owner, ill 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.