g in the terminal S		CO - 1997 A TION COMMISSION		
/ //		FOR THE PROPERTY OF THE PROPER	Form C-104 Supersedes Old C-104 and C-1. Effective 1-1-65	
6.0	AUTHODIZAMI, ILDILA	A TO THE ONLY AND MATUR.	AL GAS RECEIVED	
SAS T		· ·	WEDELL FD	
; PROTATION OFFICE ;			NOV 21 1968	
	cmá. Glia		OIL CON. COM.	
Drever 570	), Tamin note Terkenies		0131.3	
rleason(s) for filing (Cleak proper i	Change in Transporter of	Office (Please explain)		
Recompletion Change in Ownership	Castinghed Gas Const	ten july		
If change of ownership give name		wrote in [11]		
and address of previous owner				
T. DESCRIPTION OF WELL AN	D LEASE	Farmation Kind of	Lease Lease No.	
i Maratan	<u>l I I de la Class</u>	State, F	ederal or Fee 27-070315	
	.700   Cest From Title   1000   11	lag ord LOOO Feet F	rom The Nest	
	Township (2.1)	, thereby		
12			San Juen Courty	
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ON THE ST OIL AND NATIONAL DO	[4] The set (Give address to which of	approved copy of this form is to be seat)	
flateau Mathorine i Transporter of	Casingteed Ges or Dry 3 ts	Buildes (Give address to which e	approved copy of this form is to be sent)	
Fl Paso Motural	GES Courseny   Unit   Esc. Two. Age.	wir CSO, Farmi nation, Mew Metti co		
if well produces oil or liquids, give location of tanks.				
If this production is commissied V. COMPLETION DATA	with that from any other becase or pool,	, mine commingling order number		
Designate Type of Comple	$\frac{26.981}{\text{etion} + (X)} = \frac{26.981}{3}$	Morkover Deepe	n Plug Back Same Resty, Diff. Resty	
Date Spudded	Data Compl. Ready to Arca.	•	P.B.T.D.	
EC-3-56 Hievations (DF, RKB, RT, GR, etc.	Name of Producing Formation	2) (94 10 c) 00/0as Pay	Pl.Cl. Tubing Depth	
9939 G2 Perforations	The branch of the Sec	<u> 1 2.96                                   </u>	Depth Casing Shoe	
2405-15, 242	2-30. 2 BFF		21:03	
HOLE SIZE	TUBING, CASTIO, AN	CO TOTALNING RECORD	SACKS CEMENT	
23-1/4"		99:	7.00 sx	
6-3/L"	0-5/85 	<u>2'93'</u>   2 <u>5</u> 22'	700 sx	
The separate section is a second of the section of	FOR ALLCTIVITY - Federal A			
<ul> <li>C. THROY S. A. T. J. A. D. B. STEINGLING M. D. STEIN S.</li> <li>Date A. S. S. Jaw CH. Ann Te Tenns</li> </ul>	Date of Table	egy of the for for full 24 hours)  15. 11. 15 ho for full 24 hours)	d oil and must be equal to or exceed top allowers lift, etc.)	
Length of Test	Tubling Pressure	Districty <b>Descriptio</b>	Choke Size	
Actual Pred. During Tent	04-000	1 1 1 4 3 5 5 5 .	Gas - MCF	
G/ 3 / 10 10 10 14 800 70	Langua of Mark	1.1% Quar Buste/MMCF	Gravity of Condensate	
	5.51 - 1. F. F. H. H. H. H.	non The Carlo Saturday	Choke Sie :	
ا محمد دو در این	· · · · · · · · · · · · · · · · · · ·	4.5 4.1	: 15.7	
			RVATION COMMISSION NOV 2 1 19	
		Original Signed by Emery C. Arnold		
		771.2	SUPERVISOR DIST. #5	
	Alan III		in compliance with AULE 1104.	
(Signature)		Mithin in a request for allowable for a newly drilled or despended with, this form must be accompanied by a tabulation of the deviation		
Pictrict Separate dant (Title)		All sections of this form must be filled out completely for allow-		
November 20, 1968		Fill out only Sections	Fill out only Sections I, II, III, and VI for changes of owner,	
	(Date)	well name or number, or tran	sporter, or other such change of condition must be filed for each pool in multiple	