	HO. OF COPIES REC	16			
	SANTA FE	7			
	FILE	17		_	
	U.S.G.S.	† / ·			
	LAND OFFICE				
	IRANSPORTER	OIL			
		GAS	1		
	OPERATOR	[3]			
1.	PROBATION OF				
	C				-

SANTA FILE	FILE					CONSERVATION COMMISSION FOR ALLOWABLE AND ANSPORT OIL AND NATURAL GAS				Porm C-104 Supersedes Old C-104 and C-116 Effective 1-1-65		
TRANSP	ORTER OIL GAS	1 3	AUT	-	I IO TR	ANSPORT	OIL AND	NATURAL	GAS			
Address	C. & E.	. Opera	tors, In	c.								
	6700 Fc	orest L	ane - Da	llas, Texa	as	•				•		
New Well Recomplet	for filing (Check X) ton Ownership	proper box,	Change Cil	in Transporter o	of: Dry G Conde	<u> </u>	Other (Pleas	e explain)				
	of ownership gives of previous or					, , , , , , , , , , , , , , , , , , , 						
Lease Nam	TION OF WEL	LL AND I		p. Pool Name, I	ncluding F	ormation		Kind of Leas		Fee	Lease No.	
Location Unit Le	tter L	;18	40 Feet F	rom The Sou	th Li	ne and	1090	Feet From	The	West		
Line of	Section 6	Tow	nship	31N F	Range	10W	, NMPM	1,		San Juan	County	
I. DESIGNA	TION OF TRA	NSPORT	ER OF OI	L AND NATU	RAL GA	ıs						
	uthorized Transpo			Condensate			Give address	to which appro	wed copy of	this form is to	be sent)	
El Pa	uthorized Transpo	Gas Cor	,		P.ge.	Box 9		mington,	New Me	this form is to	be sent) 401	
give locati	on of tanks.	· · · · · · · · · · · · · · · · · · ·		<u> </u>	<u>;</u>		lo			· · · · · · · · · · · · · · · · · · ·		
	luction is commi TION DATA	ingled with	h that from		e or pool,	New Well	Workover	Deepen	Plug Bac	k Same Res's	v. Diff. Restv.	
Design	nate Type of C	ompletion		Ready to Prod.	Х	x	ł		1	! ! 		
6.	/23/78		7	/16/78		Total Dep	2900	· · · · · · · · · · · · · · · · · · ·	P.B.T.D.			
Perforation	Elevations (DF, RKB, RT, GR, etc., Name of Producing*Formation Blanco PC Perforations				n 	Top Oil/Gas Pay . 2698			Tubing Depth 2758 Depth Casing Shoe			
26	98' - 273 8'			TUBING, CAS	ING, AND	CEMENT	ING RECOR	D				
	12-1/4"			g & TUBING ! 8-5/8"	SIZE		199.57			SACKS CEME	INT	
	7-7/8"		·····	4-1/2" 1-1/4" 23/8			2898' 2758' 2520				. 50/50 poz . 50/50 poz	
OIL WEL	TA AND REQU	EST FO	R ALLOW			pth or be fo	full 24 hours	<i>)</i>		equal to or ex	ceed top allow-	
Date First	New Oil Run To T	Canks	Date of Test			Producing	Method (Flou	, pump, gas li	ft, etc.)			
Length of	'eet		Tubing Pres	ure		Casing Pr	essure		Choke St	Z.		
Actual Pro	l, During Test		Oil-Bbls.			Water - Bbl	B.	· · · · · · · · · · · · · · · · · · ·	Gas-MC			
CAC WEY	т	L				1			1	<u> </u>		
Actual Pro	I. Test-MCF/D		Length of Te	et	·	Bbls. Com	densate/MMCi	7	Gravity 8	Consensate		
Testing Me	thod (pisos, back s	pr.)	Tubing Press	we(Shut-in)		Casing Pro	6 3 0	-in)	Choke Si			
. CERTIFIC	CATE OF COM	IPLIANC	E				OIL			OMMISSION		
Commission	rtify that the ruing have been contue and complet	mplied wi	th and that	the information	n given	APPRO	veo iginal Si	gned by A	<u> </u>	endrick	9	
<u> </u>	* Cumm	Signati	we)	.a.t		If t well, th tests ts	s form is to his is a requ is form must ken on the v	be filed in onest for allow be accompanied in accom	compliance vable for a nied by a dance with		or deepened the deviation	
(Fitte) (1) 22 18 (Date)					tests taken on the well in accordance with MULE 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.							