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U.S.G.5.				
LAND OFFICE				
TRANSPORTER	OIL			
	GAS			
OPERATOR		2		
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	DISTRIBUTION SANTA FE FILE U.S.G.S. LAND OFFICE IRANSPORTER GAS OPERATOR PRORATION OFFICE Operator	REQUEST F	ONSERVATION COMMISSION FOR ALLOWABLE AND NSPORT OIL AND NATURAL G	Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65							
	WTR Oil Company Idress P.O. Drawer LL, Cortez, Colorado 81321										
	Reason(s) for filing (Check proper box) New We!! Recompletion Change in Ownership X	Change in Transporter of: Oil Dry Gas Casinghead Gas Conden	一一一								
	If change of ownership give name and address of previous owner	Getty Oil Company, P.	O. Box 3360, Casper, Wy	oming 82602							
11.	DESCRIPTION OF WELL AND L Lease Name Navajo "M"	Well No. Pool Name, Including Fo		rederat 2000							
	Location Unit Letter G : 172 Line of Section 34 Town	Peer From The	e and 1750 Feet From 2								
II.	DESIGNATION OF TRANSPORT	ER OF OIL AND NATURAL GA	s								
	Name of Authorized Transporter (1011) Shell Pipeline Corpora	or Condensate	Address (Give address to which appro- P.O. Box 1588, Fari								
	Name of Authorized Transporter of Cast		Address (Give address to which appro-								
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Ege. C 34 32N 17W	Is gas actually connected? Wh	en							
	If this production is commingled with COMPLETION DATA	h that from any other lease or pool,	give commingling order number:								
. • •	Designate Type of Completion	n — (X)	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.							
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.							
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth							
	Perforations			Depth Casing Shoe							
			CEMENTING RECORD	SACKS CEMENT							
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMEN!							
V.	TEST DATA AND REQUEST FO	OR ALLOWABLE (Test must be a able for this de	pth or be for full 24 hours)	and must be equal to or exceed top allow-							
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas li	ift, etc.)							
	Length of Test	Tubing Pressure	Casing Pressure	Choke M2e							
	Actual Prod. During Test	Oil-Bbie.	Water - Bbls.	od-yes - 0 1979							
				SEPTION.							
	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensale							
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size							
			OIL CONSERV	ATION COMMISSION							
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.) bl	7 1 2 13 43								
		Original Signed by A. R. Kendrick SUPERVISOR DISTRICT # 3									
CO appliator (Title)			TITLE	TITLE							
			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.								
							Sept- 11, 19	19	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.		