NO. OF COPIES RECE	19			
DISTRIBUTIO				
SANTA FE				
FILE		/		
U.S.G.S.	<u> </u>			
LAND OFFICE				
TRANSPORTER	OIL	17		
	GAS	1/	-	
OPERATOR	13			
PRORATION OF				

## NEW MEXICO OIL CONSERVATION COMMISSION

Form C-104

- 1	SANTA FE		/ ]	_	RE	QUEST F	OR ALLOWABLE		Supersedes ( Effective 1-1	Old C-104 and C-110	
FILE							AND			Ellective 1-1-63	
	U.S.G.S.			_ AUTHO	RIZATION	3A3					
	LAND OFFICE		<i>-</i>	_							
	TRANSPORTER -	OIL	<u> </u>	_							
		GAS	1/3	_					_	10 SE"	
	OPERATOR		·/ -								
1.	PRORATION OFFIC	CE			<del></del>						
	1830										
	Address App 1 3 108										
		7	.0. 1	los P. Aste	io. The N	reico 8	71.10		, PA1	44.44	
	Reason(s) for filing (C						Other (Plea	ise explain)	/ OIT		
	New Well	3			Transporter o	f:				part of the	
	Recompletion			Oil		Dry Gas	· <u> </u>			· · · · · · · · · · · · · · · · · · ·	
	Change in Ownership	ل_		Casinghe	ad Gas	Conden	sate				
	76 -1 6	.i									
	If change of ownersh and address of previous										
II.	DESCRIPTION OF	WEL	L AND	Well No.	Pool Name, I	ncluding Fo	rmation	Kind of Leas	se	Lease No.	
	- m		,			anda Ba	<b>L</b> ore a	State, Feder	cl or Fee	P=1730=5	
	Location	B. AX		35	40						
			. 75	<b>x</b>	m. <b>1</b> 50	Line	and 1700	Feet From	The The		
	Unit Letter		·			Line	and	1 cct 1 to			
	Line of Section	<b>36</b>	т	ownship 🎾 🔭	erth :	Range 1	2 West , NM	РМ,	See Jane	County	
	Ellie of occiton			<u> </u>							
III.	DESIGNATION OF	TRA	NSPOI	RTER OF OIL	AND NATI	JRAL GA	s				
	Name of Authorized T	Transpor	ter of C	or C	ondensate 👗	)	Address (Give addre	ss to which appr	oved copy of this form	is to be sent;	
	73	atan	14, A	ecrycrate	<u> </u>		P.O. Nog 1	08, Parmi	oved copy of this form	is to be sent!	
	Name of Authorized T				or Dry G	as 🗀	1			13 10 00 3010)	
	III. Proc			One Compan	¥		Is gas actually connected? When				
	If well produces oil o		s,	Unit Sec	I	Rge.	is gas detainy com	ected:   "		ļ	
	give location of tanks			<del></del>	6 384						
	If this production is	commi	ngled v	with that from a	ny other leas	e or pool,	give commingling or	der number:			
IV.	COMPLETION DA	ATA_			Oil Well	Gas Well	New Well Workov	er Deepen	Plug Back Same	Res'v. Diff. Res'v.	
	Designate Type	e of C	omplet	tion - (X)	1	XX	XX			1	
	Date Spudded			Date Compl.	Ready to Prod	•	Total Depth 7640	,	P.B.T.D.		
	2-28-6	67		2-05	<del>-6</del> 7		6740 10		7635	<u> </u>	
	Elevations (DF, RKB	3, RT, G	R, etc.	Name of Proc	lucing Formati	on	Top Oil/Gas Pay		Tubing Depth		
	6364 Or. 63	370 1		Orandi	merce and Juleata		7406 ID		7020 13		
	Perforations	-07,	751	5-86, 7 <del>540</del>	-52				Depth Casing Shoe		
	74	<b>X-77</b>	<b>36 m</b>	na 7400-34			7640 13			K3	
							CEMENTING REC		SACKE	CEMENT	
	HOLE	SIZE			G & TUBING	SIZE	390 AB	1 SET	250 ess.	CEMERA	
17		7 1/1	10 3/4" 00 7 3/6" 08			3730 ID		600 ags			
	6 3/4**			1 1/5"	50		7640 B		160 mm		
	0 3/4			7 4/4			1010				
					ADIE OF		the second of sec-1	volume of load o	oil and must be equal to	or exceed top allow-	
V	. TEST DATA ANI	D REQ	UEST	FOR ALLOW	ABLE (1e.	e for this d	epth or be for full 24 h	ours)			
	Date First New Oil F	Run To	Tanks	Date of Test	;		Producing Method (	Flow, pump, gas	lift, etc.)		
	Length of Test			Tubing Pres	swe		Casing Pressure		Choke Size		
									Gas - MCF		
	Actual Prod. During	Test		Oil-Bbls.			Water-Bbis.		GGB-MCF		
		2	7	e, 4-14-67							
	GAS WELL					Bbls. Condensate/MMCF		Gravity of Conder	Gravity of Condensate		
	Actual Prod. Test-				bours						
	·	_	k ne )	1 -	sure (Shut-i	<u>a )</u>	Casing Pressure (1	Shut-in)	Choke Size		
	Testing Method (pit	or, pac	• p(+)	2021		,	2017 pe	lg .	3/A"		
_						0	OIL CONSERVATION COMMISSION				
V	VI. CERTIFICATE OF COMPLIANCE										
منفر المنظل المنافر المن المن المنافر					of the Oil Co	nservation	APPROVED_	APR 18	130/	19	
	I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information gives the best of my knowledge and believed.										
	abana in tono and	00001	40	the heat of my	v knowledge	and belief.	II BACTTOTTOT	<del>~y</del>			

Xen. i (	(1 We berton 14 C. Williams  Signature)	
The Design	trist (Signature)	_
	(Title)	

April 17, 1967

(Date)

TITLE SUPERVISOR DIST. 35

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.

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.