NO. OF COPIES RECI	EIVED	1	
DISTRIBUTION			
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PROPATION OFFICE			

## NEW MEXICO OIL CONSERVATION COMMISSION

	SANTA FE	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-110			
	FILE		AND	Effective 1-1-65			
	U.S.G.S.	AUTHORIZATION TO TRA	INSPORT OIL AND NATURAL	GAS			
	LAND OFFICE						
	TRANSPORTER OIL						
	GAS						
	OPERATOR PROPATION OFFICE						
1.	Operator	L					
	Service Drilling Compe	any		·			
	Address	•					
	1800 4th National Ban	1800 4th National Bank Building, Tulsa, Oklahoma					
	Reason(s) for filing (Check proper box)		Other (Please explain)				
	New Well	Change in Transporter of:  Oil Dry Gas					
	Recompletion Change in Ownership	Casinghead Gas Conden	<del>                                     </del>				
	Similar in						
	If change of ownership give name and address of previous owner	William Gruenerwald & A	ssociates, Inc., P. O. Bo	x 909 Colorado Sprinas			
	and address of previous owner	WILLIAM CTOCHOL WOLD C.7.	<u> </u>	Colorado 80901			
II.	DESCRIPTION OF WELL AND	LEASE					
	Lease Name	Well No. Pool Name, Including Fo	1	Count ite			
	Gonzales – Pittman	#1 Dakota	State, Feder	al or Fee Fee N/A			
	Location						
	Unit Letter; 660	Unit Letter; 660 Feet From The South Line and 660 Feet From The West					
	Line of Section 24 Tow	mship 2N Range 21	F NIMEDA	Mora County			
	Line of Section 24 Tow	mship ZIN Range ZI	L , NMPM,	Mora County			
111	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA	s				
	Name of Authorized Transporter of Oil		Address (Give address to which appro	oved copy of this form is to be sent)			
	N/A						
	Name of Authorized Transporter of Cas	inghead Gas or Dry Gas	Address (Give address to which appro	oved copy of this form is to be sent)			
	If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected?	hen			
	give location of tanks.	1					
		h that from any other lease or pool,	give commingling order number:				
IV.	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back   Same Res'v. Diff. Res'v.			
	Designate Type of Completion		X	X			
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.			
		2/5/76-Ready to Perforate	2916'	1015'			
	Elevations (DF, RKB, RT, GR, etc.,	Name of Producing Formation	Top-911/Gas Pay	Tubing Depth			
	6190 G.L 6200 K.B.	Dakota	496'	N/A			
	Perforations 496-526, 606-60	<u>Dakota</u> 09, 684-696, 731.5-737.5,	754-758, 786-792,	Depth Casing Shoe			
	828-832, 930-934			1040			
			CEMENTING RECORD				
	HOLE SIZE	CASING & TUBING SIZE	410'	SACKS CEMENT 450			
	12-5/8"	10-3/4" Casing	1040'	300			
	8-3/4"	7" Casing	1040	300			
<b>1</b> .7	TEST DATA AND DECLIEST FO	OP ALLOWARIE (Test must be at	fter recovery of total volume of load oil	l and must be equal to or exceed top allow-			
₩.	EST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)						
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas l	ift, etc.)			
	N/A Length of Test	N/A					
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size			
			Water - Bbls.	Gas - MCF			
	Actual Prod. During Test	Oil-Bbis.	Water - Dote.				
	GAS WELL						
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate			
	None						
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size			
VI.	CERTIFICATE OF COMPLIANCE	CE	OIL CONSERV	ATION COMMISSION			
				10			
	I hereby certify that the rules and r	egulations of the Oil Conservation	APPROVED	, 19			
	Commission have been complied wabove is true and complete to the	vith and that the information given beat of my knowledge and belief.	BY				
	apove is the sid complete to me		11				
		>	TITLE				
		3	This form is to be filed in	compliance with RULE 1104.			
	-111/22		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 to the section of the section o				
	Jack Zimmerman Signature)						
	Agent for Roy Reese, Service Drilling Company						
	(Title)		able on new and recompleted w	IT III and UT for changes of owner.			
	3/2/76 (Date)		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.				
	(Da	/	Separate Forms C-104 mu	st be filed for each pool in multiply			
			completed wells.				