	NO. OF COP IN RECEIVE				
	DISTRIBUTION SANTA FE		CONSERVATION COMME IN	Form C-104 Supersedes Old C-104 and C+11	
	FILE	Z	AND	Effective 1-1-65	
	U.S.G.S.	AUTRECEIVEDIBYO TH	ANSPORT OIL AND NATURA	L GAS	
	IRANSPORTER OIL	050 0 0 1005			
	GAS	SEP 3 0 1986			
1	PRORATION OFFICE	- O. C. D.			
•.	Operator	ARTESIA, OFFICE			
	Address Timoth	y D. Collier			
	•	Box 798, Artesia, NM	88211-0798		
	Reason(s) for filing (Check proper b	pox)	Other (Please explain)		
	New We!!	Change in Transporter of:			
	Change in Ownersh	Oil Dry C Casinghead Gas Cond	ensate		
	If change of ownership give name and address of previous owner	Barber Oil, Inc.,	P. O. Box 1658, Ca	rlsbad, NM 88220	
T	DESCRIPTION OF WELL AN				
	Lease Name	Well No. Fool Name, Including	Formation Kind of L	ease Lease Nc.	
	Turner Federal	16 Russell-Yat	ES SAND State, Fea	deral or FeeFed. LC-050797	
	Location	321 N	2220	7.7	
	Unit Letter 7 ; 2	321 Feet From The N	ne and <u>2339</u> Feet Fro	om. The W	
	Line of Section 13	Cownship 205 Range	28E , NMPM,	Eddy County	
	DESIGNATION OF TRANSPO	PTER OF OUL AND MATURAL O			
	Name of Authorized Transporter of C	RTER OF OIL AND NATURAL G.	Address (Give address to which ap	proved copy of this form is to be sent)	
	Navajo Crude Oil H	urchasing	P. 0. Drawer 159 Ar	tesia, NM 88210	
	Name of Authorized Transporter of C	Casinghead Gas or Dry Gas	Address (Give address to which ap	proved copy of this form is to be sent)	
		Unit Sec. Twp. Ege.	Is gas actually connected?	When	
	If well produces oil or liquids, give location of tanks.	13 205 28E			
		with that from any other lease or pool,	give commingling order number:		
v .	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back 'Same Res'v.' Diff. Res'v.	
	Designate Type of Complet	ion = (X)			
	Date Spudded	Date Compl. Ready to Prod.	Total Derth	P.B.T.D.	
	Elevations (DF, RKB, RT, GR, etc.,	Name of Producing Formation	Top O!!/Gas Pay	Tubing Depth	
	Perforations			Depth Casing Shoe	
	TUBING, CASING, AND CEMENTING RECORD				
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
ļ				Post ID-3	
ļ				10-12-86	
			· • •••••••••••••••••••••••••••••••••••	chy ap	
۱.	TEST DATA AND REQUEST I			bil and must be equal to or exceed top allow -	
-	OIL WELL Date First New Oil Bun To Tanks	able for this de	pth or be for full 24 hours) Producing Method (Flow, pump, gas	life atc.)	
	Bare - Har Hen CH - Han 10 Fanks		Proceeding Kennoe (From, pamp, gas		
ŀ	Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
-	Actual Prod. During Test	O(1-Bbla.	Water-Bbls.		
	Actor , iber beinig feb.				
'-	· · · · · · · · · · · · · · · · · · ·		<u>.</u>	· · · · · · · · · · · · · · · · · · ·	
	GAS WELL	Length of Test	Bbla. Condensate/MMCF		
	Actual Prod. 1881-MCF/D	Length Cr. Test	Bris. Condensate/MMCF	Gravity of Condensate	
Ī	Testing Method (pitot, back pr.)	Tubing Fressure (Shut-in)	Cosing Pressure (Shut-in)	Choke Size	
L	}_		<u> </u>		
. (CERTIFICATE OF COMPLIAN	CE		ATION COMMISSION	
I	hereby certify that the rules and regulations of the Oil Conservation		APPROVED OCI	10 1986	
C	Commission have been complied	with and that the information given a best of my knowledge and belief.		nal Signed By	
·				A. Clements	
		/	•	visor District II	
7 -	- months li	Ciller .		n compliance with EULE 1904. owable for a newly drilled or desurge	
÷	Sitt of the Sitt of the Sitt of Sitt		well this term must be socom	prnied by a trbulation of the deviation	
			frette taken on the well in soo All ac tions of this form t	must be filled out completely for all as	
		1. f	vale as new end recompleted	Wells. II, III, and VI for changes of owner	
	-)		r ill our only Sections 1, we'll there of number, or transp	ii, iii, and vi for change of condition	

is a subject of the second of the second	must be filed for each pool in much	- i - 1
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