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5-OCC, 1-HLKendrick
1-F

NEW MEXICO OIL CONSERVATION COMMISSION

REQUEST FOR ALLOWABLE

AND

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

Beta Development Co.

Address
234 Petr. Club Plaza, Farmington, N. M.

Reason(s) for filing (Check proper box)

New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

INLAND CORPORATION PURCHASED ALL THE ASSETS
OF BOTH LaMAR TRUCKING, INC. AND INLAND CRUDE,
INC. THIS PURCHASE INCLUDED N. M. S. C. C.
PERMIT # 670 WHICH HAS BEEN TRANSFERRED TO
INLAND CORPORATION.

If change of ownership give name
and address of previous owner

CLYDE C. LaMAR, PRESIDENT
INLAND CORPORATION

II. DESCRIPTION OF WELL AND LEASE

Lease Name Blanco Wash Federal	Well No. 1	Pool Name, Including Formation Basin Dakota	Kind of Lease Federal
Location Unit Letter N , 790 Feet From The South Line and 1700 Feet From The West Line of Section 26 , Township 28N Range 9W , NMPM, San Juan County			State, Federal or Fee SF-077111

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> LaMar Trucking, Inc.	Address (Give address to which approved copy of this form is to be sent) PO Box 1528, Farmington, N. M.		
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> El Paso Natural Gas Co.	Address (Give address to which approved copy of this form is to be sent) PO Box 990, Farmington, N. M.		
If well produces oil or liquids, give location of tanks.	Unit N	Sec. 26	Twp. 28N
		Rge. 9W	Is gas actually connected? No
			When waiting on pipeline connection

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		X	X					
Date Spudded 5-1-65	Date Compl. Ready to Prod. 5024065	Total Depth 6771'	XXXXXX CO 6716'					
Pool Basin Dakota	Name of Producing Formation Dakota	Top Oil/Gas Pay 6547'	Tubing Depth 6630'					
Perforations 6547-51 & 6646-49' w/4 JPF 6583-6607' w/2 JPF			Depth Casing Shoe					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4"	8-5/8"		312'		175 sx			
7-7/8"	4-1/2"		6770'		1225 sx			
2" EUE Set @ 6630'								

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(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 lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D 2,252	Length of Test 3 hrs	Bbls. Condensate/MMCF NA	Gravity of Condensate NA
Testing Method (pitot, back pr.) choke	Tubing Pressure 181	Casing Pressure 549	Choke Size 3/4"

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.


(Signature)

Manager

(Title)

6-4-65

(Date)

OIL CONSERVATION COMMISSION

APPROVED JUN 8 1965

BY 
TITLE Supervisor Dist. # 3

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 Sections I, II, III, and VI only 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.