NO. OF COPIES REC	6				
DISTRIBUTION					
SANTA FE		1			
FILE		1	1		
U.S.G.S.					
LAND OFFICE					
TRANSPORTER	OIL	1			
	GAS	1			
OPERATOR		2			
PRORATION OFFICE					
Operator					
Shall- Ail Company					

November 10, 1966 (Date)

SANTA FE /		NEW MEXICO OIL CONSERVATION COMMISSION Form C-104			
FILE /	REQUES	REQUEST FOR ALLOWABLE Supersedes Old C-104 and C-1. Effective 1-1-65			
U.S.G.S.	AUTHORIZATION TO TE	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS			
LAND OFFICE	AOTHORIZATION TO TR	CANSFORT CIL AND NATURAL	_ GAS		
TRANSPORTER OIL					
GAS /					
OPERATOR 2					
PRORATION OFFICE Operator					
Reason(s) for filing (Check proper New Well Recompletion Change in Ownership give na and address of previous owner II. DESCRIPTION OF WELL A Lease Name	Change in Transporter of: Oil Dry C Casinghead Gas Cond	Formation Kind of Le State, Fed	eral or Fee Pederal Cont #34		
		530	Ammelha		
Line of Section 27	Township Range	, NMPM,	Arriba County		
III. DESIGNATION OF TRANSI	PORTER OF OIL AND NATURAL G	AS			
Name of Authorized Transporter	····	Address (Give address to which app	proved copy of this form is to be sent)		
Gamerland Pipelis	es, Inc.		1001 West Central Av Denver, Colorado		
Name of Authorized Transporter of			proved copy of this form is to be sent)		
El Paso Matural		Box 990, Farmington, Is gas actually connected?	When		
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge.	Tes	when		
IV. COMPLETION DATA	ed with that from any other lease or pool	, give commingling order number:			
Designate Type of Comp	Oll Well Gas Well	New Well Workover Deepen	Plug Back Same Restv. Diff. Restv.		
		The second secon			
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
Elevations (DF, RKB, RT, GR, e	to.: Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth		
, , , , , , , , , , , , , , , , , , , ,	,,,,,,,, .				
Perforations			Depth Casing Shoe		
		ND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
V. TEST DATA AND REQUES	T FOR ALLOWABLE (Test must be	after recovery of total volume of load of	oil and must be seed top allow		
OIL WELL Date First New Oil Run To Tank		depth or be for full 24 hours) Producing Method (Flow, pump, gas	W CHILD		
Date First New Cil Hun To Tank	bate of Test	Producing Method (1. 100), pamp, gos	" A COLINE I		
Length of Test	Tubing Pressure	Casing Pressure	Choke Size 1966		
			Choke Size 1 41966		
Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	das-MCF CON.		
			OIL COST. 3		
CACHETY					
GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate		
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size		
VI. CERTIFICATE OF COMPL	IANCE	OIL CONSERVATION COMMISSION			
I hereby certify that the rules and regulations of the Oil Conservation		APPROVED			
Commission have been comply	ied with and that the information given				
above is true and complete to	o the best of my knowledge and belief.	II	d by A. R. Kendrick		
			ENGINEER DIST. NO. 3		
(ORIGINAL) H. E. Asb		This form is to be filed in compliance with RULE 1104.			
	(SIGHED / FL. E. MAD	If this is a request for all	lowable for a newly drilled or deepened		
	(Signature)	well, this form must be accome tests taken on the well in accome.	panied by a tabulation of the deviation		
District Superio	tendent	All sections of this form	must be filled out completely for allow-		
(Title)		able on new and recompleted	wells.		

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.

