ſ	MO. OF COPIES RECEIVED 5			
ļ	DISTRIBUTION SANTA FE		ONSERVATION COMMISSION FOR ALLOWABLE	Form C-104 Supersedes, Old C-104 and C415 Effective, 1-1-65
	FILE		AND USDODT OU AND MATURAL C	- / / · 4131/1881
	U.S.G.S.	AUTHORIZATION TO TRAF	NSPORT OIL AND NATURAL G	AS TEED OF TOTAL
	OIL /			$-\sqrt{2}$
	TRANSPORTER GAS /			MCO MCO 19/
	PRORATION OFFICE			1757. 3
1.	Operator	1. Co		
,	Continental Oi	1 Company		
		, Casper, Wyoming 82601	Other (Please explain)	
	Reason(s) for filing (Check proper box)  New Well  X	Change in Transporter of:	Other (Freuse expense)	
	Recompletion	Oil Dry Gas	· 🔲	
	Change in Ownership	Casinghead Gas Condens	sate [_]	
	If change of ownership give name and address of previous owner			
II. DESCRIPTION OF WELL AND LEASE    Well No.   Pool Name, Including Formation   Kind of Lease   Vindes ignated   Gallup   State, Federal or Fee   Fee				Lease No.
	Jicarilla 28	12 Undesignated Undesignated D	State, Federal	cr Fee Federal 66
	Location  Unit Letter L ; 790 Feet From The West Line and 1850 Feet From The South			
	Unit Letter L; 790	Feet From The West Line	e and <u>183U</u> Feet From T	he South
	Line of Section 27 Tow	mship 25N Range	4W , NMPM, Ric	o Arriba County
III.	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GAS  or Condensate	Address (Give address to which approve	ed copy of this form is to be sent)
	Name of Authorized Transporter of Oil Shell Oil Company	G. Gallaniania	P.O. Box 1588, Farmin	ngton, New Mexico
	Name of Authorized Transporter of Cas		Address (Give address to which approv P.O. Box 990, Farming	
	El Paso Natural Gas C	Company  Tunit Sec. Twp. Rge.	Is gas actually connected? When	
	If well produces oil or liquids, give location of tanks.	J 28 25N 4W	Yes	12=12-71
IV.	If this production is commingled wit COMPLETION DATA	th that from any other lease or pool,	New Well Workover Deepen	R-4203 Plug Back   Same Res'v. Diff. Res'v.
	Designate Type of Completion		X	
	Date Spudded	Date Compl. Ready to Prod. 12-17-71	Total Depth 7675	P.B.T.D. 7646
	11-6-71 Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	6505 Gallup	Tubing Depth 7299'
	DR			Depth Casing Shoe
•		, 6570-76, 6597-99, 6615- 9 (2 shots) 7390-96 (4 sh		7475-77 (2 7657'
	shots) 7518-24(4 shots)	7549-51 TUBING, CASING, AND	DEPTH SET	s) 7558-76 (10 shots) SACKS CEMENT
	HOLE SIZE	CASING & TUBING SIZE  8 5/8"	239'	150
	7 7/8"	4 1/2"	7674	1100
		2 3/8"	7299	
	THE AND BEOUTET F	OP AT LOWARIE (Test must be a	fter recovery of total volume of load oil a	and must be equal to or exceed top allow-
OH. WELL				
	Date First New Oil Run To Tanks	Date of Test 12-20-71	Pumping Gallup & Dake	
	12-3-71 Length of Test	Tubing Pressure	Casing Pressure	Choke Size
	24 Hours		Water-Bbls.	Gas-MCF
	Actual Prod. During Test	011-Bble. 34/12 452/07/5-	90 Bbls. Load Water	149
	Allowable Requested: 50 BOPD - commingling approved Case No. 4595,			
	GAS WELL Order No. R-Actual Prod. Test-MCF/D	4203, Dated 9-15-71 Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
		ICF.	OIL CONSERVA	TION COMMISSION
V	I. CERTIFICATE OF COMPLIANCE		FEB 2 1974	
	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.			Emery C. Arnold
			By Original Signed by Emery C. Arnold SUPERVISOR	
			TITLE	
	Carett Ochlison		Tracking to a sequent for allow	compliance with MULE 1104.
	(Signature) Administrative Supervisor (Title) January 25, 1972 (Date)		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	
			Separate Forms C-104 must be lifed for each poor in massage,	