NO. OF CUPIES RECEIVED			5	
DISTRIBUTION				
SANTA FE		1		
FILE		1	-	
U.S.G.S.				
LAND OFFICE				
TRANSPORTER	OIL	1		
	GAS	1		
OPERATOR		1		
			7	

	SANTA FE / FILE / L	REQUEST F	ONSERVATION COMMISSION FOR ALLOWABLE AND	Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65	
	U.S.G.S. LAND OFFICE TRANSPORTER OIL / GAS / OPERATOR / PRORATION OFFICE	AUTHORIZATION TO TRAI	NSPORT OIL AND NATURAL G	AS	
1.	Operator				
J. Gregory Merrion & Robert L. Bayless					
Address P. O. Box 507, Farmington, New Mexico 87401 Reoson(s) for filing (Check proper box) Other (Please explain)					
	New Well XX	Change in Transporter of:			
	Recompletion	Oil Dry Gas	<u> </u>		
	Change in Ownership	Casinghead Gas Conden	sate		
	If change of ownership give name and address of previous owner			<u> </u>	
П.	I. DESCRIPTION OF WELL AND LEASE Well No. Real Name Including Formation				
	Lease Name	Well No. Pool Name, Including Fo	State Federal	Lease No. Lease No.	
	Canada Mesa	1 Basin Dakota		4-4	
	Unit Letter A ; 100	OO Feet From The N Line	e and Feet From 1	The E	
				Rio Arriba County	
Ш.	DESIGNATION OF TRANSPORT	or Condensate XX	S Address (Give address to which approx	ved copy of this form is to be sent)	
	The Permian Corporation		P. O. Box 1702, Farmin	ngton. New Mexico 87401	
	Name of Authorized Transporter of Cas	or Dry Gas 🔼	Address (Give address to which approx		
	El Paso Natural Gas Comp		P. O. Box 990, Farmington, New Mexico 874		
	If well produces oil or liquids, give location of tanks.	A 24 24N 6W	Yes	August 3, 1972	
11/	If this production is commingled wit COMPLETION DATA	h that from any other lease or pool,	give commingling order number:		
14.	Designate Type of Completio	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Restv. Diff. Restv.	
		Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
	Date Spudded July 10, 1972	July 27, 1972	6822		
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oll/Gas Pay	Tubing Depth	
	6585 GR	Dakota	6456	6640 Depth Casing Shoe	
	Perforations 6456-6461, 6570-6578,659	06_6616			
	0470-0401, 0710-0710,07	TUBING, CASING, AND	CEMENTING RECORD		
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
		8-5/8" Casg 4-1/2" Csg	173 6820	125	
		2-3/8" Tbg	6640		
V.	V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be able for this depth or be for full 24 hours)				
OIL WELL Date First New Oil Run To Tanks Date of Test Producing Method (Flow, pump, gas lift, etc.)				W. W. KLULIY ED	
			Casing Pressure	Chok-61173 4 1972	
	Length of Test	Tubing Pressure	Casing Pressure	Hod -	
	Actual Prod. During Test	Oil-Bbis.	Water-Bbls.	DIST. 3	
				UIST. 3	
	GAS WELL				
	Actual Prod. Test-MCF/D	Length of Test	Bbis. Condensate/MMCF	Gravity of Condensate	
	Testing Method (pitot, back pr.)	3 hours Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
	Back Pressure	2315 psig	2315 psig	3/1,11	
VI.	. CERTIFICATE OF COMPLIAN		OIL CONSERVA	ATION COMMISSION	
- =			APPROVED AUG 4, 1972, 19		
	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. Co-Owner Co-Owner		Spring Signed by Emery C. Arnold		
			TITLE 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.		
			tests taken on the well in acco	ordance with RULE 111. ust be filled out completely for allow-	
			All sections of this form m	olla.	

(Title)

(Date)

August 4, 1972

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.