ſ	NO. OF COPIES RECEIVED		5	
t				
1	SANTA FE		7	
ı	FILE		1	4
	U.S.G.S.			
	LAND OFFICE			L
	TRANSPORTER	OIL	1	L
		GAS		
- 1	OPERATOR		1	
	PRORATION OFFICE			
;				

-  -  -  -	DISTRIBUTION  SANTA FE /  FILE /  U.S.G.S.	REQUEST FO	NSERVATION COMMISSION OR ALLOWABLE AND SPORT OIL AND NATURAL GA	Form C-104 Supersedes Old C-104 and C-110 Elfoctive 1-1-65			
	LAND OFFICE  IRANSPORTER OIL / GAS / OPERATOR / PRORATION OFFICE						
	Operator El Paso Natural Ga	as Company					
ŀ	Address						
	PO Box 990, Farmington, NM 87401  Other (Please explain)						
l	Reason(s) for filing (Check proper box)  New We!1 X Change in Transporter of:						
	Recompletion	Oil Dry Gas Casinghead Gas Condense					
İ	Change in Ownership	Castinghieud das contame					
;	If change of ownership give name and address of previous owner						
	DESCRIPTION OF WELL AND L	FASE					
11.	Lease Name	Well No. Pool lane, increaming to		Lease No. SF 078909			
	Lindrith Unit	74 So. Blanco Picture	ed Cillis   Cilling	51 0/0/0/			
	Unit Letter H 1700	Feet From The North Line	and 890 Feet From Th	e <u>East</u>			
	20	24N -		Arriba County			
	Line of Section 20 Town	nship Z4IN Range	2 ( ) temperal				
n.	DESIGNATION OF TRANSPORT	ER OF OIL AND NATURAL GAS	Address (Give address to which approve	ed copy of this form is to be sent)			
	Name of Authorized Transporter of Oil	as Company	PO Box 990. Farmingto	on, NM 87401			
Address (Give address to which approved copy of this form is				ed copy of this form is to be sent)			
	El Paso Natural G	as Company	Is gas actually connected? When				
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. H 20 24N 2W	is gas actually considered.				
		h that from any other lease or pool, g	ive commingling order number:				
ſ٧.	COMPLETION DATA		New Well Workover Deepen	Plug Back   Same Restv. Diff. Restv.			
	Designate Type of Completion	n - (X)	X				
	Date Spudded	Date Compr. Meday to 1.041	Total Depth 3236*	р.в.т.D. 3225'			
	6-18-73 Elevations (DF, RKB, RT, GR, etc.)	8-27-73 Name of Producing Formation	Top &1/Gas Pay	Tubing Depth			
	7127'GL	Pictured Cliffs	3090'	tubingless Depth Casing Shoe			
	Perforations 3090-3102', 3116-						
	TURING CASING AND CEMENTING RECORD						
	HOLE SIZE	CASING & TUBING SIZE 8 5/8"	124'	SACKS CEMENT  106 cu. ft.			
	12 1/4" 7 7/8" & 6 3/4"	2 7/8"	3236'	167 cu. ft.			
	7770 0007	tubingless					
		D ATTOWARTE (Test must be af	ter recovery of total volume of load oil a	and must be equal to or exceed top allow-			
V.	TEST DATA AND REQUEST FO	able for this dep	or be for full 24 hours) Producing Method (Flow, pump, gas life	and the second second			
	Date First New Oil Run To Tanks	Date of Test	Producing Marion (1 100) Pampy 0	RIL			
	Length of Test	Tubing Pressure	Casing Pressure	Cheke Size			
		Oil - Bbis.	Water - Bbis.	Gen-MGF_1			
	Actual Prod. During Test			GE COM COM			
				DIST. 3			
	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate			
	712	3 hrs.	Casing Pressure (Shut-in)	Choke Size			
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	903	3/4"			
•	Calc. AOF  CERTIFICATE OF COMPLIANCE	tubingless CE		TION COMMISSION			
VI			APPROVED SEP 6 197	3 19			
		hereby certify that the rules and regulations of the Oil Conservation commission have been complied with and that the information given the heat of my knowledge and belief.		Original Signed by Inter			
	above is true and complete to the	best of my knowledge and belief.	TITLE SUPERVISOR DIST. #3				
				TITLE DUFAMILE			
	A Grande		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 only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.				
	1Sian	ature)					
	Drilling Clerk						
	(Ti	itle)					
	September 5, 197	7 <u>3</u>					

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.