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	GAS	1	
OPERATOR		1	
PRORATION OFFICE			
Operator		-	

	SANTA FE	Form C-104 Supersedes Old C-104 and C-11					
	FILE	REQUEST FOR ALLOWABLE AND					
	U.S.G.S.	AUTHORIZATION TO TRA	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS				
	LAND OFFICE	AUTHORIZATION TO TRA	AOTHORIZATION TO TRANSFORT OIL AND NATURAL GAS				
	TRANSPORTER OIL						
	GAS /						
	OPERATOR /						
I.	PRORATION OFFICE Operator			· · · · · · · · · · · · · · · · · · ·			
	Mannine Gas & Oi	1 Company	•				
	Manning Gas & Oil Company Address c/o Walsh Engineering & Prod. Corp., P. O. Box 254,						
		w Mexico 87401	., 1. 0. 50. 254,	·			
	Reason(s) for filing (Check proper box)  Other (Please explain)						
	New Well	Change in Transporter of:					
	Recompletion	Oil Dry Ga	ıs 🖳				
	Change in Ownership	Casinghead Gas Conder	nsate				
	If change of ownership give name						
	and address of previous owner						
11	DESCRIPTION OF WELL AND LEASE Jicarilla Contr. No. 129						
11.	Lease Name	Well No. Pool Na	me, Including Formation	Kind of Lease			
	Apache	13 So.	Blanco P. C.	State, Federal or Fee Indian			
	Location						
	Unit Letter I ; 185	O Feet From The South Lin	ne and 690 Feet From T	he East			
	1.2	2/30	ATI Dia A				
	Line of Section 13 , To	wnship 24N Range 4	4W , NMPM, Rio A	Arriba County			
***	DESIGNATION OF TRANSPOR	TED OF OH AND NATURAL CA	a e				
111.	Name of Authorized Transporter of Oi	TER OF OIL AND NATURAL GA	Address (Give address to which approv	ed copy of this form is to be sent)			
	None			., , ,,			
	Name of Authorized Transporter of Ca	singhead Gas or Dry Gas 🛣	Address (Give address to which approv	ed copy of this form is to be sent)			
	Northwest Pipeline	Corporation	P. O. Box 90, Farmir	ngton, New Mex.87401			
	If well produces oil or liquids,	Unit   Sec.   Twp.   Rge.	Is gas actually connected? Whe	n			
	give location of tanks.	1 1 1	No	1-15-74			
	If this production is commingled w	ith that from any other lease or pool,	give commingling order number:				
IV.	COMPLETION DATA	COL Wall	Name West Markets				
	Designate Type of Completi		New Well Workover Deepen	Plug Back   Same Res'v. Diff. Res'v.			
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.			
	7-21-74	3-25-74	3165	3039			
	Pool	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth			
	6889 KB	Pictured Cliffs	2990	2995			
	Perforations	Perforations		Depth Casing Shoe			
			D CEMENTING RECORD	Y			
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT			
	12-1/4	8-5/8 4-1/2	99' 3096'	80			
	7-7/8	1-1/2	2995	75			
		1-1/2	2993				
v	EST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allow-						
• •	IL WELL  [1 est must be after recovery of total volume of load oil and must be equal to or exceed top allowable able for this depth or be for full 24 hours)						
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas life	t, 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 3/4 - 1.509	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate			
	ADF - 2:454	3 hrs.					
	Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size			
	Back Pressure	900	900	3/4"			
VI.	CERTIFICATE OF COMPLIANCE		OIL CONSERVA	TION COMMISSION			
			APPROVED DEC 2.3 1974				
	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.		BY Original Signed by A. R. Kendrick  PETROLECA EAGLELE LAST. NO. 3				
	For: Manning Gas &	Oil Co.	TITLE PETROLEUM LAGILALE LAST. NO. 3				
	nii.	A/(1/2)					
	Levell Ule	Jelyk	This form is to be filed in compliance with RULE 1104.				
	Fuell N Walsh (Sim	nature/D F Dracidant	If this is a request for allow well, this form must be accompanied.	able for a newly drilled or deepened nied by a tabulation of the deviation			
	Ewell N. Walsh, (Signature)P.E., President,		tests taken on the well in accordance with RULE 111.				

(Title)

December 18, 1974

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.