	NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS ON CORFORATION  PAGO, TEXAS Other (Please explain) Change in Transporter of:				
RODUCTION 796, LL	AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS ON CORPORATION  PAGE TEXAS  Other (Please explain)				
RODUCTION 196, LL	ON CORPORATION  HACO, TEXAS  Other (Please explain)				
RODUCTION 196, LL	ON CORPORATION  HACO, TEXAS  Other (Please explain)				
RODUCTION 196, LL	. PACO, TEXAS  Other (Please explain)				
ROBUCTION 196, LL	. PACO, TEXAS  Other (Please explain)				
796. LL	. PACO, TEXAS  Other (Please explain)				
796. LL	. PACO, TEXAS  Other (Please explain)				
796. LL	. PACO, TEXAS  Other (Please explain)				
	Other (Please explain)				
	Other (Please explain)				
proper bax)					
	Change in Transporter of:				
	Change in Transporter of:				
	Off Dry Gas				
	Casinghead Gas Condensate				
ve name wher	Well No. Pool Name, Including Formation Kind of Lease				
	State, Federal or I				
,_1050	Feet From The S Line and ECO Feet From The				
Town	waship 26W Ronge 4W , NMPM, RIO ARRIE				
	L AND				

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

	Change in Ownership	Casinghead Gas Cond	lensate						
	If change of ownership give name and address of previous owner								
11.	DESCRIPTION OF WELL AND	TEACE							
	Lepse Name JICARTILIA 120 "C"	Formation P. C.	Lease No.						
	Location T 1. 5.	() a	800		10				
	Unit Letter I; $1.50$ Feet From The S Line and $800$ Feet From The E								
	Line of Section 31 To	ownship 26N Range	<u>↓₩</u> , ммрм,	RIO ARF	IBA	***	County		
III.	DESIGNATION OF TRANSPOR	AS Address (Give address to which approved copy of this form is to be sent)							
	Name of Authorized Transporter of Co EL FASO NATURAL GAS CO	Address (Give address to which approved copy of this form is to be sent)							
	If well produces oil or liquids, give location of tanks.	If well produces oil or liquids, Unit Sec. Twp. Rge.			FARMINGTON, NEW MEXICO Is gas actually connected? When YES				
		ith that from any other lease or pool	, give commingling order	number:					
IV.	COMPLETION DATA	Oil Well Gas Well	New Well Workover	Deepen	Plug Back	Same Restv.	Diff. Res'v.		
	Designate Type of Completi	On - (A) X  Date Compi. Ready to Prod.	Total Depth		P.B.T.D.	!	<u> </u>		
		- To Company Head (10 ) Toda	Total Beptil		F.B.1.D.				
	Elevations (DF, RKB, RT, GR, etc.)	OF, RKB, RT, GR, etc.; Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
	Perforations	1	·	Depth Casin	g Shoe				
	TUBING, CASING, AND CEMENTING RECORD								
	HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT								
		sand pump and cleaned o		s of perf	crations	<u> </u>			
	ne 1811 3210.04 01	1 1/4' tuping, set at 3	220.141.						
V.	TEST DATA AND REQUEST FOIL WELL	ST 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 able for this depth or be for full 24 hours)							
	Date First New Cil Run To Tanks	ow Cli Run To Tanks Date of Test		Producing Method (Flow, pump, gas lift, e			etc.)		
	Length of Test	th of Test Tubing Pressure		Casing Pressure		Constal ED			
	Actual Prod. During Test	Oil-Bbis.	Water-Bbls.			72	<b>}</b>		
					Kr	25 1913			
	GAS WELL			1	OCI	ON. 3	7		
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF		Franklis C	Signal .	<i></i>		
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-	in)	Choke Size				
γI.	CERTIFICATE OF COMPLIAN	OIL CONSERVATION COMMISSION							
	I hereby certify that the rules and	APPROVED OCT 2 5 1973 . 19							
	Commission have been complied above is true and complete to the	Omiginal Signed by A. R. Kendrick							
		TITLE PETROLEUM ENGINEER DIST. NO. 3							
	06	This form is to be filed in compliance with RULE 1104.  If this is a request for sllowable 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 allow-							
	(Sign								
	MANAGER PRODUCTION								
	σανομές 25, 1973	able on new and recompleted wells.  Fill out only Sections I, II, III, and VI for changes of owner,							
	(Do	well name or number, Separate Forms	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.			•			