Vana saabu si waki madalaya. Wiseos pakasawahawa wanas	NO. OF COPIES RECEIVED SISTRIBUTION SANTA FE FILE U.S.G.S. LAND OFFICE THANSPORTER GAS J	REQUEST	ONSERVATION COMMISSION FOR ALLOWABLE AND NSPORT OIL AND NATURA	Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65
	OPERATOR /			
1.	AMOCO PRODUCTION COMPANY OIL CON. COM.			
	Reason(s) for filing (Check proper box) New Well Recompletion Change in Ownership	Change in Transporter of: Oil Dry Gas Casinghead Gas Conden	Other (Please explain)	DIST. 3
	If change of ownership give name and address of previous owner			
11.		Well No. Pool Name, Including Fo South Blanco P: 50 Feet From The South Line	e and 1700 Feet 7	rom The Rast
Ш.	DESIGNATION OF TRANSPORT	FER OF OIL AND NATURAL GA	adress (Give address to which approved copy of this form is to be sent)	
	Name of Authorized Transporter of Casinghead Gas or Dry Gas X Northwest Pipeline Corporation		Address (Give address to which approved copy of this form is to be sent) 501 Airport Drive, Farmington, New Mexico 87401	
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge.	Is gas actually connected?	When 5-14-57
	If this production is commingled wit COMPLETION DATA Designate Type of Completic	th that from any other lease or pool, on $-(X)$ Gas Well	give commingling order number:	
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
	Perforations			Depth Casing Shoe
	HOLE SIZE	TUBING, CASING, AND	DEPTH SET	SACKS CEMENT
v.	TEST DATA AND REQUEST F		fter recovery of total volume of load pth or be for full 24 hours)	i oil and must be equal to or exceed top allow-
	OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, g	as lift, etc.)
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size
	Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	Gas-MCF
	CAC WELL			
:	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
VI.	CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION FEB 7 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.		BY Original Signed by A. R. Kendrick TITLE PETROLEUM ENGINEER DIST. NO. 3	
	Original Signed by G. L. HAMILTON		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.	
	(Signature)			
	Area Administrative Supervisor (Title)		All sections of this form must be filled out completely for allowable on new and recompleted wells.	
	December 28, 1973		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.	