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SANTA FE		1	
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LAND OFFICE			L
IRANSPORTER	OIL		
	GAS	1	
OPERATOR		2	1

	DISTRIBUTION SANTA FE FILE		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 OIL	AUTHORIZATION TO TRA	NSPORT OIL AND NATURAL G	SAS						
	FRANSPORTER GAS									
	OPERATOR 2									
I.	PRORATION OFFICE Operator			· · · · · · · · · · · · · · · · · · ·						
	·	ļ								
Caulkins Oil Company										
	Reason(s) for filing (Check proper box)		Other (Please explain)	`						
	New Well Recompletion	Change in Transporter of: Oil Dry Gas	s X							
	Change in Ownership	Casinghead Gas Conden								
	If change of ownership give name and address of previous owner									
II.	DESCRIPTION OF WELL AND	LEASE								
	Lease Name	Well No. Pool Name, Including Fo	†							
	Breech	221 South Blan	CO PC State, Federa	Fed NM03733						
	Location Unit Letter D ;	90 Feet From The North Line	e and 890 Feet From 1	The West						
	Line of Section 13 Tow	mship 26 N Range	7 W , NMPM, Ric	Arriba County						
III.	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA	s							
	Name of Authorized Transporter of Oil	or Condensate	Address (Give address to which approx							
	Name of Authorized Transporter of Cas	inghead Gas or Dry Gas XXX	Address (Give address to which approx	ved copy of this form is to be sent)						
	Gas Company of New	Mexico	1508 Pacific Ave	Dallas, Texas						
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. P.ge.								
,,,	If this production is commingled wit	th that from any other lease or pool,	yes give commingling order number:							
IV.	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.						
	Designate Type of Completion	on – (X) X		1						
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.						
	11-11-57	12-57 Name of Producing Formation	2801 Top Oil/Gas Pay	Tubing Depth						
	Elevations (DF, RKB, RT, GR, etc.) 6514 DF	Pictured Cliffs	· · · · · · · · · · · · · · · · · · ·	2700						
	Perforations	riccured office	210)	Depth Casing Shoe						
	2708-			2800						
			CEMENTING RECORD							
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT						
	12 1/4"	8 5/8" 5 1/2"	103 2800	80 200						
	7 7/8"	2 3/8"	2700	200						
				·						
v.	TEST DATA AND REQUEST F	T 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-								
	OIL WELL	able for this de	pth or be for full 24 hours) Producing Method (Flow, pump, gas li	(ft. etc.)						
	Date First New Oil Run To Tanks	Date of Year	, , , , , , , , , , , , , , , , , , , ,							
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size Control						
	Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Ga-MOVOV 22						
				DIST. 3						
	GAS WELL			Dio.						
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate						
			Casing Pressure (Shut-in)	Choke Size						
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Bilde-11)	Chore Size						
VI. CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION								
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. Conservation Conservation			APPROVED NOV 22 13/6 19							
			BY Original Signed by A. R. Kendrick							
			TITLE STERVAL							
			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.							
							, 2			

Separate Forms C-104 must be filed for each pool in multiply completed wells.