	1		
NO. OF COPIES RECEIVED	NEW MEXICO OIL CON	SERVATION COMMISSION	Form C-104
SANTA FE /	REQUEST FOR ALLOWABLE		Supersedes Old C-104 and C-1 Effective 1-1-65
FILE	→	AND	Filective 1-1-92
U.S.G.S.	AUTHORIZATION TO TRAN	SPORT OIL AND NATURAL GA	NS
LAND OFFICE	AOTHORIZATION TO THE		
OIL	1		
TRANSPORTER GAS /	1		10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
OPERATOR 2	1		and the first of t
PRORATION OFFICE	1		
perator			
Jerome P. McHugh			
Address			OIL COM
Box 234, Farmington	, N. M.	Other (Please explain)	— DIST
Reason(s) for filing (Check proper box	Change in Transporter of:	0,110. (2.55.5.)	
New Well			
Recompletion	Oil Dry Gas Casinghead Gas Condens	清 し	
Change in Ownership	Custingness Cas		
change of ownership give name			
nd address of previous owner			
	TEACE		NI.
ESCRIPTION OF WELL AND	Well No. Pool Name, Including For	rmation Kind of Lease	_
	4 Ballard Pictu	red Cliffs State, Federal	or Fee SF 078477
Nordhaus	7 001101		
	550 Feet From The South Line	e and 1850 Feet From T	The west
Unit Letter;	Feet From The		
Line of Section 17 To	ownship 25N Range	7W , NMPM, Rio	Arriba Count
Line of Section 17			
NESIGNATION OF TRANSPOL	RTER OF OIL AND NATURAL GAS	S	l of skin form is to be sent)
Name of Authorized Transporter of O	il or Condensate	Address (Give address to which approx	ved copy of this form is to be sem,
1,441.4			falia form is to be sent
Name of Authorized Transporter of C	asinghead Gas or Dry Gas XX	Address (Give address to which appro-	
El Paso Matural Ga		Box 990, Farmington,	N. M.
	Unit Sec. Twp. P.ge.	Is gas actually connected? Who	en
If well produces oil or liquids, give location of tanks.			
92.0	with that from any other lease or pool,	give commingling order number:	
If this production is commingled v COMPLETION DATA			Plug Back Same Res'v. Diff. Re
	Oil Well Gas Well	New Well Workover Deepen	Flug Edea
Designate Type of Complet		X	P.B.T.D.
Date Spudded	Date Compl. Ready to Prod.	Total Depth	22721
4/17/69	5/21/69	2310'	Tubing Depth
Elevations (DF, RKB, RT, GR, etc.,	Name of Producing Formation	Top Oil/Gas Pay	
6465' Gr.	Pictured Cliffs	2179	2250' Depth Casing Shoe
Perforations			Bopin Gasting and
2230' to 2249'			
		D CEMENTING RECORD	SACKS CEMENT
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	
11 1/4"	8 5/8"	91'	75 sx.
7 7/8"	4 1/2"	2309'	150 sx.
	1 1/4"	22501	
		the recovery of total valume of load oi	l and must be equal to or exceed top (
THE TATA AND DECILES!	FOR ALLOWABLE (Test must be a	ifter recovery of total volume of	Cara man or a que
TEST DATA AND REQUEST	FOR ALLOWABLE (Test must be a able for this de	epth or be for full 24 hours)	lift. etc.)
TEST DATA AND REQUEST OIL WELL Date First New Oil Run To Tanks	FOR ALLOWABLE (Test must be a able for this de	epth or be for full 24 hours) Producing Method (Flow, pump, gas	lift, etc.)
OIL WELL		Producing Method (Flow, pump, gas	lift, etc.)
OIL WELL		epth or be for full 24 hours) Producing Method (Flow, pump, gas Casing Pressure	Choke Size
Oll. WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas and Casing Pressure	lift, etc.)
Oll. WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas	Choke Size
OIL WELL Date First New Oil Run To Tanks Length of Test	Date of Test Tubing Pressure	Producing Method (Flow, pump, gas and Casing Pressure	Choke Size
OIL WELL Date First New Oil Run To Tanks Length of Test	Date of Test Tubing Pressure	Producing Method (Flow, pump, gas and Casing Pressure	Choke Size
Oll. WELL Date First New Oil Run To Tanks Length of Test Actual Prod. During Test	Date of Test Tubing Pressure Oil-Bbls.	Producing Method (Flow, pump, gas and Casing Pressure Water-Bbis.	Choke Size Gas-MCF
OIL WELL Date First New Oil Run To Tanks Length of Test	Date of Test Tubing Pressure	Producing Method (Flow, pump, gas and Casing Pressure	Choke Size
Oll. WELL Date First New Oil Run To Tanks Length of Test Actual Prod. During Test GAS WELL Actual Prod. Test-MCF/D	Tubing Pressure Oil-Bbls. Length of Test 3 hrs.	Producing Method (Flow, pump, gas and Casing Pressure Water-Bbls. Bbls. Condensate/MMCF	Choke Size Gas-MCF Gravity of Condensate
Oll. WELL Date First New Oil Run To Tanks Length of Test Actual Prod. During Test GAS WELL Actual Prod. Test-MCF/D 374	Date of Test Tubing Pressure Oil-Bbls. Length of Test	Producing Method (Flow, pump, gas and Casing Pressure Water-Bbis.	Choke Size Gas-MCF Gravity of Condensate Choke Size
Oll. WELL Date First New Oil Run To Tanks Length of Test Actual Prod. During Test GAS WELL Actual Prod. Test-MCF/D 374 Testing Method (pitot, back pr.)	Tubing Pressure Oil-Bbls. Length of Test 3 hrs. Tubing Pressure (shut-in)	Producing Method (Flow, pump, gas of Casing Pressure Water-Bbis. Bbis. Condensate/MMCF Casing Pressure (Shut-in)	Choke Size Gas-MCF Gravity of Condensate Choke Size 5/8"
Oll. WELL Date First New Oil Run To Tanks Length of Test Actual Prod. During Test GAS WELL Actual Prod. Test-MCF/D 374 Testing Method (pitot, back pr.) one pt. back pres	Date of Test Tubing Pressure Oil-Bbls. Length of Test 3 hrs. Tubing Pressure (shut-in) 5. 531	Producing Method (Flow, pump, gas of Casing Pressure Water-Bbis. Bbis. Condensate/MMCF Casing Pressure (Shut-in)	Choke Size Gas-MCF Gravity of Condensate Choke Size 5/8" /ATION COMMISSION
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OIL WELL Date First New Oil Run To Tanks Length of Test Actual Prod. During Test GAS WELL Actual Prod. Test-MCF/D 374 Testing Method (pitot, back pr.) one pt. back press I. CERTIFICATE OF COMPLI I hereby certify that the rules a	Tubing Pressure Oil-Bbls. Length of Test 3 hrs. Tubing Pressure (shut-in) 5. 531 ANCE	Producing Method (Flow, pump, gas of Casing Pressure Water-Bbls. Bbls. Condensate/MMCF Casing Pressure (Shut-in) [169 OIL CONSERVA	Choke Size Gas-MCF Gravity of Condensate Choke Size 5/8" /ATION COMMISSION AUG 6 1969

Original aigned by T. A. Dugan

Agent

7/28/69

(Signature)

(Title)

(Date)

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