NO. OF COPIES REC	6			
DISTRIBUTIO				
SANTA FE	1			
FILE	1	1		
U.S.G.S.				
LAND OFFICE				
TRANSPORTER	OIL	1		
THANSIONTEN	GAS	1		
OPERATOR	2			
PRORATION OF				

		4											
	DISTRIBUTION			NF	EW MEXICO C	OIL CON	JSERVA	TION COMMISS	ION	F	orm C-104		
Ī	SANTA FE	REGUEST FOR ALLOWABLE						Supersedes Old C-104 and C-110					
ŀ	FILE									ffective 1-1-65			
-	U.S.G.S. AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS							A C					
ŀ	LAND OFFICE	+		AUTHURIZ	ZATION TO	IKAN	SPUK I	UIL AND NA	TURAL G	45			
-	OIL	+											
	TRANSPORTER	+/-											
	GAS	: / 	ļ. —										
	OPERATOR	12		1									
I.	PRORATION OFFICE	<u> </u>	<u> </u>										
	Operator		_										
		Jul I	.och	Oil Corpore	ation of 6	Calif	ornia						
	Address												
	92	. Va	ugh	n Building,	Midland,	Texa	B 7970	01					
	Reason(s) for filing (Check)							Other (Piease ex	plain)				
	New Well			Change in Tra	insporter of:								
	Recompletion			Oil		Ory Gas							
	Change in Ownership 🏋			Casinghead G	as C	Condenso	ıte						
i													
	If change of ownership giv	e nar	ne	Compess Eq	nl. The	. Box	7738	Parmingto	on. New	Mexico)		
	and address of previous or	vner ₋		Conficient and		3 25.700		y					
ш.,	DESCRIPTION OF WEI	<u>LL A</u>	ND I		Well No. Po	al Maria	To alredia	a Farmettan		Kind of L	9059	····	
	Lease Name			Lease No.								79 d 3	
	Lind	rith	<u> </u>		54	Larg	o Ger	lup(Gas)		State, Fe	deral or Fee	Federal	
	Location												
	Unit Letter F	,	3.45	Feet From Ti	he Morth	Line	and	1750	Feet From T	he	et West		
	J	- /					_						
	Line of Section		Tow	nship 26N	Range	e 7%	7	, NMPM,	Rio Ara	iba		County	
ı							·						
TTT	DESIGNATION OF TRA	NSD	רפה	CED OF OUT AN	ID NATURA!	T GAS							
III.	Name of Authorized Transpo				ensate	L UAS	Address (Give address to i	vhich approv	ed copy of	this form is to	be sent)	
	į.					į	·	Box 1528,				i	
	La M	ar i	cruc	king, Inc.	or Dry Gas		Addross /	Give address to t	which approx	ed convot	this form is to	he sent!	
	Name of Authorized Transpo				-30		Address (_			_	Į.	
	El P	650	Mat	rural Gas Co				Box 1161,			iem Werice)	
	If well produces oil or liquid	is,		Unit Sec.	Twp. Rg		s gas ac	tually connected?	Whe				
	give location of tanks,			TO L	26 N	'7W		Yes		,	<u>18-63</u>		
	If this production is comm	inale	d wit	h that from any of	ther lease or	nool gi	ve comm	ningling order n	umber:				
	COMPLETION DATA	ingic	u wit	in that from any of	inci icaco oi j	P 002, 6-				**			
				Oil W	Vell Gas W	Well 1	Vew Well	Workover	Deepen	Plug Bac	k Same Res'	v. Diff. Res'v.	
	Designate Type of C	Comp	letio	on = (X)	,	i		i I		1 1	1	i	
	Date Spudded			Date Compl. Read	y to Prod.		Total Der	oth		P.B.T.D		<u> </u>	
	Sate spaces				•		•						
	Flourities (DE RVD DT	2.0		Name of Producing	a Formation		Top Oil/C	Zas Day		Tubing E)enth		
	Elevations (DF, RKB, RT, 6	sK, et	tc.j	Name of Producting	g Formulion		1 op 011/ (ods ruj		I uping i	, ор		
				<u> </u>					···-	Donah Co	sing Shoe		
	Perforations										Depth Cdaing Shoe		
				TUB	ING, CASING	, AND	CEMENT	TING RECORD		,			
	HOLE SIZE			CASING &	TUBING SIZE	E		DEPTH SET			SACKS CEM	ENT	
				 									
										 			
											•		
V.	TEST DATA AND REQ	UES	T F	OR ALLOWABL	E (Test mus	st be afte this dans	r recover	ry of total volume or full 24 hours)	of load oil o	ind must b	e equal to or e	cceea top allow=	
	OIL WELL			Date of Test	4016 701 1			Method (Flow, 1	ump, gas lif	t. etc.)			
	Date First New Oil Run To Tanks Date of Test						riouuciii	A Monios (1 10m) b	, ap, g	,,			
										Chales 6	EPENA		
	Length of Test			Tubing Pressure			Casing P	tesante		Choke S	iti tivi	D/D	
										/ /	(LULIT!	<u> </u>	
	Actual Prod. During Test			Oil-Bbls.			Water - Bi	ols.		Gan - MC	F	~~ l	
											JAN 1719	66	
										1		COM.	
	GAS WELL									OIL CON. COM.			
	Actual Prod. Test-MCF/D Length of Test					Bbls. Condensate/MMCF			Gravity of College to 3				
										•			
	Testing Method (pitot, back	ne I		Tubing Pressure			Casing P	ressure	<u></u>	Choke S.	ze		
	lesting Method (pitot, back	pity		I donly Flessure			oubling .						
										l			
VI.	CERTIFICATE OF COMPLIANCE						OIL CO	NSERVA	TION C	OMMISSION	1		
									ER SI -	a 1000			
	I hereby certify that the rules and regulations of the Oil Conservation					ation	APPROVED <u>JAN 1 8 1968</u> , 19						
	Commission have been complied with and that the information given					given 📙							
	above is true and complete to the best of my knowledge and belief.					elief.	L DV (Promat Master Preserv C. Armen						
	10'	7		- <i>(</i>)			TITLE Superisor Diek #3						
	$\mathcal{L} \mathcal{L} \mathcal{L} \mathcal{L} \mathcal{L} \mathcal{L} \mathcal{L} \mathcal{L} $												
	1 / ra . 11						TI	nis form is to b	e filed in o	omplianc	e with RULE	1104.	
	(/II) / / Miller						If this is a request for allowable for a newly drilled or deepened					d or deepened	
	(Signature)						well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.						
	Dist. Mgr.												
		(Title)					A :	ll sections of th	nis form mu	st be fille	ed out comple	tely for allow-	
	1-11-66						able on new and recompleted wells.						
				uto l		-	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.						
	(Date)						well name of number, or transporte				, or outer seem oriente or constituti		

(Date)

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.