NO. OF COPIES RECEIV	/CC	<u> </u>			
			CONSERVATION COMMISSION	Form C-104	
SANTA FE	The mexico oil c		FOR ALLOWABLE	Supersedes Old C-104 and C-116	
FILE			AND	Effective 1-1-65	
0.5.6.5.	-	AUTHORIZATION TO TRA	ANSPORT OIL AND NATURAL O	GAS	
LAND OFFICE					
TRANSPORTER -	CAS				
OPERATOR	G A S	1			
PROPATION OFFI	CE	1			
Sperator Sperator					
	CU	RTIS J. LITTLE			
Andress		0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0			
· · · · · · · · · · · · · · · · · · ·		O. Box 2487, Farmingtor	n, New Mexico 87401 Other (Please explain)		
Recson(s) for filing (C	neck proper box	/ Change in Transporter of:	Cine (recase explain)		
Becon pletion	Ä	OII Dry Go	as .		
Change in Ownership	j	Casinghead Gas Conce	nsate		
If change of ownersh, and address of previous					
II. DESCRIPTION OF	WELL AND	LEASE			
Lease Nome		Well No. Pool Name, Including F	C	1 Cuciai	
j	REVEY	#1 Ballard Pic	tured Cliffs State, Fesera	1 or Fee NM 011639	
Location Unit Letter G	:	O Feet From The North Lin	rie and 1840 Feet From 1	The East	
Line of Section	19 To	waship 26 North Range	7 West , NMPM, Rio	Arriba County	
H. TERSIONATION OF	TRANSPOR'	TER OF OIL AND NATURAL GA	AS		
Name of Authorized To	cannegarter of Cil	or Condensate	Address (Give address to which approv	ved copy of this form is to be sent)	
	-				
Name of Authorized Tr	ansporter of Ca	singhedd Gas 📗 or Dry Gas 🗶	Adaress (Give address to which approv	<u>-</u>	
El Paso Nati	ira <u>l Gas C</u>	ompany	P.O.Box 990, Farmington Is gas actually connected? Whe		
If well produces oil or		Unit Sec. Twp. Age.		s soon as possible	
give location of tanks.			<u> </u>	F	
If this production is (V. COMPLETION DA)	commingled wi TA	th that from any other lease or pool,	give comminging order number:		
		Cil Well Gas Well	New Well Workover Deepen	Plug Back Same Resty. Diff. Resty.	
Designate Type	or Completic	1	X	2244	
Date Spudded	0.1	Date Compl. Ready to Prod.	Total Depth 2254	2244	
	1-81	5-23-81 Name of Producing Formation		Tubing Depth	
Elevations (DF, RKB,	<i>RT, GR, etc.,</i> 52	Pictured Cliffs	2166	none	
Perforations				Depth Casing Shoe	
	66-73, 218	3-2212 w/22 shots		2244	
		TUBING, CASING, AN	D CEMENTING RECORD	1 61646 651517	
HOLE S	IZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT 85 SX	
12½"		7"	142 2254	310 sx	
61/4'		2-7/8"	2454		
		1			
V. TEST DATA AND	REQUEST F	OR ALLOWABLE (Test must be a	after recovery of total volume of load oil	and must be equal to or exceed top allow-	
OH, WELL		able for this d	epth or be for full 24 hours) ! Producing Method (Flow, pump, gas li	300	
Date First New Oil Ru	in To Tenks	Date of Test	Producing Method (Flow, pump, gas it		
		Tubing Pressure	Casing Pressure	Cnoke Size	
Langth of Test		TOTAL PROJUME			
Actual Prod. During T	est	O11-3b1s.	Water-Bbis.	MAX-200 1100	
			\C:		
1			1	Oist.	
GAS WELL			Phia Cord-maio ANGE	Gravity of Condensate	
Actual Fros. Test-MC	CF/D	Length of Test	Bbis. Condensate/MMCF		
646	hank no	3-hour Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
Testing Method (puot, Bk. Pr.	ouck pr.)	-	552/7-day SI	3/4"	
	COMPLIAN	CE		ATION COMMISSION	
I. CERTIFICATE OF	CUMPLIAN	C.L.			
I hereby certify that	the rules and	regulations of the Oil Conservation	APPROVED	JUN 1 0 1981 19	
Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.				Original Signed by FRANK T. CHAVEZ	
			SUPERVISOR DISTRICT # 3		
			TITLE		

Curtis J Little

(Signature)

OPERATOR (Title)

May 18, 1981 (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.