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THAMB! ON EN	GAS	,		
OPERATOR		1		
PROBATION OFFICE				

FEBRUARY 17, 1967

NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE

Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65

	GAS					
	LAND OFFICE	Sinelair Oil Corporation Merged				
	TRANSPORTER OIL / GAS ,			inte Atlantic Richfield Company		
	OPERATOR /	-		affective March 4, 1969		
I.	PRORATION OFFICE	1				
1.	Operator					
	Sinclair Oil & Gas Company SINCLAIR OIL CORPORATION Address 501 Lincoln Tower Building, Denwer, Colorado 80203					
	Address 501 Lincoln Tower Building, Denwer, Colorado 80203					
	Reason(s) for filing (Check proper box) Other (Please explain)					
	Recompletion	Change in Transporter of: Oil Dry Gas Dry Gas				
	Change in Ownership	Casinghead Gas Conde	$_{ extsf{nsate}}$ $oxed{\mathbb{Z}}$ $ig $ $ig $ EFFECTIVE M	ARCH 1, 1967		
	If change of ownership give name		·			
	and address of previous owner					
II.	DESCRIPTION OF WELL AND					
	Lease Name WN	Well No. Pool Name, Including F	l l	20000 1101		
	Krause Federal	MN 5 Basin	n Dakota State, Federa	rl or Fee Federal		
	Unit Letter N 1190	Feet From The N	1625	m . V		
	Line of Section 28 Tov	vnship 28N Range]	L1W , NMPM, S	an Juan County		
III.	DESIGNATION OF TRANSPORT					
	Name of Authorized Transporter of Oil		Address (Give address to which appro	· · · · · · · · · · · · · · · · · · ·		
	THE PERMIAN CORPORA Name of Authorized Transporter of Cas		P. O. BOX 3119, MID Address (Give address to which appro	•		
	El Paso Natural			• • •		
		Unit Sec. Twp. Rge.	P. O. Box 990 Farmi Is gas actually connected? Wh	ngton, New Mexico		
	If well produces oil or liquids, give location of tanks.	N 28 28N 11W	Mox Yes			
	If this production is commingled wit	· · · · · · · · · · · · · · · · · · ·				
IV.	COMPLETION DATA		-			
	Designate Type of Completio	n - (X)	New Well Workover Deepen	Plug Back Same Resty. Diff. Resty.		
	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		İ	Depth Casing Shoe		
	Pendulions Depth Cusing Shoe					
		TUBING, CASING, AND	CEMENTING RECORD			
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
V.	TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be a few op allow-					
	OIL WELL able for this depth		oth or be for full 24 hours) Producing Method (Flow, pump, gas lift, etc.)			
	Date First New Cil Hun 10 Idnks	Date of Test	Producing Method (P. tow, pump, gas to	in end of the same		
	Length of Test	Tubing Pressure	Casing Pressure	Chake Size		
				L CIL CAN COM		
	Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas MCF		
	GAS 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		
				<u> </u>		
VI.	CERTIFICATE OF COMPLIANCE		OIL CONSERVA	TION COMMISSION		
			ABBBOVES	10		
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given		APPROVED 19 Closed by Emery C. Arnold				
	above is true and complete to the	best of my knowledge and belief.	BY			
		TITLE SUPERVISOR DAST, #S				
			This form is to be filed in compliance with RULE 1104.			
	777 & Brown (Signature)			vable for a newly drilled 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.			
	CHIEF OFFICE	CLERK		dence with RULE 111. st be filled out completely for allow-		
	(Title)		able on new and recompleted we	ells.		

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.