Annual Service de des constantes	··-		
DISTRIBUTION	_		
SANTA FE	NEW MEXICO OIL CONSERVATION COMMISSION Form C-104		Form C-104
FILE	REQUEST	T FOR ALLOWABLE	Supersedes Old C-104 and C-1 Effective 1-1-65
U.S.G.S.	-	AND	
LAND OFFICE	AUTHORIZATION TO TR	RANSPORT OIL AND NATURAL	L GAS
101, 17	-		
IRANSPORTER GAS			
OPERATOR 2			
PROPATION OFFICE			
Operator			
ENGINEERING &	PRODUCTION SERVICE,	INC.	
P. O. Box 190	, Farmington, New Mex	xico 87401	
Reason(s) for filing (Check proper b	ox)	(ther (Please explain)	
New Well	Change in Transporter of:		
Recompletion	Ott DtA (Gas 🔲	
Change in Ownership X	Casinghead Gas Cond	lensate	
If change of ownership give name and address of previous owner	SSOCIATED ROYALTY CO	0.: 1105 United Banl	k Center, Denver, Colo
DESCRIPTION OF WELL AND Lease Name Navajo Tri		Formation : Kind of Le	
of Indians "F"		oe Gallup State, Fed	eral or Fee Federal 2034
Location D 66	• -	•	
Offit Cetter	7 Pet 1 Toll The		m The West
Line of Section 10 T	ownship 31N Range	17 W , NMPM,	San Juan County
DESIGNATION OF TRANSPO	RTER OF OIL AND NATURAL G		
Name of Authorized Transporter of C	=		proved copy of this form is to be sent)
Shell Pipeline Con		Bx. 1588; Farming	ton, New Mexico 87401
Name of Authorized Transporter of C	Casinghead Gas or Dry Gas	Address (Give address to which app	proved copy of this form is to be sent)
	Unit Sec. Twp. Age.	Is gas actually connected?	When
If well produces oil or liquids, give location of tanks.	F 10 31 17	ì	
If this production is commingled w COMPLETION DATA	with that from any other lease or pool		
Designate Type of Complet	ion (Y)	New Well Workover Deepen	Plug Back Same Resty. Diff. Resty
Designate Type of Complet	ion = (A)	<u> </u>	1 1
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Elevations (DF, RKS, RT, GR, etc.,	Name of Producing Formation	Top Off/Gus Pay	Tubing Depth
Ferferations			Depth Casing Shoe
		ID CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	BACKS CEMENT
		1	
TEST DATA AND REQUEST I		after recovery of total volume of load o lepth or be for full 24 hours)	il and must be equal to or exceed top allow
OII. WELL Date First New Oil Fur To Tanks	Date of Test	Producing Method (Flow, pump, gas	lift, etc.)
·		!	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Tost	On-She.	Water - Bbis.	Gas - MCF
	<u> </u>		
GAS WELL			
Actual Prod. Test-MJF/D	Lengtr of Test	Bbis. Condensate/MMCF	Gravity of Condensate
esting Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

I. CERTIFICATE OF COMPLIANCE

OIL CONSERVATION COMMIS APPROVED.

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.

By Original Signed by Emery C.

Arno16 SUPERVISOR DIST. #3

J. D. Hicks

President Service, Inc

& Production (Title)

1-30-75

(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 sllow-able 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.