	PLATE OF THE WIND XICO	(C.		form C Revise	-104 d 10-1-78	
mi)	RGY AND MIDERALS DEPARTMENT	OIL CONSERVA		N	16.83	,	
	(OE) MINUT ION	P. O. DO CANTA EE NEV	V MEXICO 87501	-106	2/10		
	THE THE	SANTA L., HE	, , , , , , , , , , , , , , , , , , , ,	30	16-8-		
١	W & G. b.	PENUEST FOI	R ALLOWABLE	ユ ー	· .		
ł	TRANSCONTER OIL	Λ	ND		ATT IES	<u>.</u>	
	UPERATOR	AUTHORIZATION TO TRANSI	PORT OIL AND NATU	RAL GAS	ar tiri	1	
1.	PRUNATION OFFICE						
	SOLAR PETROLEUM, INC	· · · · · · · · · · · · · · · · · · ·			NOV 1 1982		
	999 18th St., #1300,		-	\ (OIL CON. COM	• /	
	Reason(s) for filing (Check proper box,	,,	Other (Please	explain)	DIST. 3		
	New Well	Change in Transporter on					
	Recompletion	Oil A Dry Go Casinghead Gas Conder	· /51				
-	Change in Ownership						
	If change of ownership give name and address of previous owner				· · · · · · · · · · · · · · · · · · ·		
		LEASE				713è	
II.	DESCRIPTION OF WELL AND Lease Name Navajo Tribe	1150		Kind of Lease State, Federal	reveral	-20-603-203	
	Of Indians 'F'	153 Horseshoe Gal	llup				
	Location .	330 Feel From The SOUTH Lin	ne and 1330 1	Feet From T	he WEST		
	Unit Letter K : 1			_		County	
	Line of Section 10 Tov	waship 31North Range	17West ` NMPM	. San	Juan	County	
- 1	TRANSPORT	TER OF OIL AND NATURAL GA	Address (Give address	7:1	ad some of this form i	s to be centl	
II.	None of Authorized Transporter of	_	Address (Give address		omfield, NM		
	l – Ciniza Pineline, INC	C.	Address (Give address)	o which approv	ed copy of this form i	s to be sent)	
	Kane of Authorized Transporter of Cas	Singinud Gas		· · · · · · · · · · · · · · · · · · ·			
	If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connecte	ed? Whe	n		
	give location of tanks.	<u> E 10 31N 17W </u>	in a mingling order	numb er:			
-	If this production is commingled with	th that from any other lease or pool,	give comminging order		Plug Back Same R	asty Diff Basty	
V.	COMPLETION DATA	Oil Well Gas Well	New Well Workover	Deepen I	Frag Back Same I	,	
	Designate Type of Completic	Date Compl. Ready to Prod.	Total Depth	_1	P.B.T.D.		
•	Date Spudded	3/18/81	940'			IA	
-	2/10/81 Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay		Tubing Depth		
	5213' GR	Gallup	852'		Depth Casing Shoe		
-	Perforations 852-854', 857-875'				927'		
_	852-854 , 857 873		D CEMENTING RECOR	D	SACKS CI	MENT	
-	HOLE SIZE	CASING & TUBING SIZE	91.74'	<u> </u>	100		
	12-1"	8-5/8"	71.74				
_	6-1 "	4-3"	927'		300		
_		2-3/8"	feer recovery of total volu	me of load oil s	and must be equal to o	rexceed top allow-	
v.	TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a able for this de	enth or be for full 24 hours	• /			
_	OIL WELL Date First New Oil Run To Tenks	Date of Test	Producing Method (Flou	v, pump, gas tij	i, <i>eic.</i> /		
	3/18/81	3/20/81 Tubing Pressure	Pumping Casing Pressure		Choke Size		
_	Length of Test	Tubing Process					
_	24 hour Actual Pred. During Test	Oil-Bbis.	Water - Bbls.		Gai-MCF		
	210	52	158		I ISIM		
_			•		1		
_	Actual Prod. Toal-MCF/D	Length of Test	Bbls. Condensate/MMC	F	Gravity of Condensa	1•	
		Tubing Presswe (Shut-in)	Cosing Pressure (Ehut	-in)	Choke Size		
_	Teating kiethod (pilot, back pr.)]		
	CERTIFICATE OF COMPLIAN	CE	B1		ION DIVISION		
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.			APPROVED 1		1983 —	<u> </u>	
			41				
			BT	er on the state	, 1787 # 3	_	
	1Xn		TITLE		ampliance settle service	F 1104	
	(/(// //	11	This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepened				
	XX ush	II	I be accomba	nied DY & lecuistion	Of file Geatering		
	Kin	aiwe)	well, this form mu	well in accor	dence with MULK 1	11.	
		SINEFR	tests taken on the	this form mu	at be filled out comp	• • •	
	STAFF PETEOLEUM ENG	SINEFR	All sections of solutions of so	this form mu completed we	at be filled out compile.	anges of owners	
	STAFF PETEOLEUM ENG (T) October 28, 1	SINEFR	All sections of All sections of sole on new and re Fill out only well name or number	this form mucconpleted we Sections I. II	at be filled out compile.	oletely for allow- anges of owner, ange of condition.	