HU. UP . SHIES RECEIVED			. 4		
DISTRIBUTION					
SANTA FE					
FILE			-		
U.S.G.S.					
LAND OFFICE					
TRANSPORTER	OIL				
	GAS	1			
OPERATOR		L			
PRORATION OFFICE					
Operator					
ELK OIL COMPAN					
Address					

NEW MEXICO OIL CONSERVATION COMMIS ... N REQUEST FOR ALLOWABLE AND

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

	U.S.G.S. AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS					
	IRANSPORTER OIL RECEIVE					
	GAS 1					
1. OPERATOR / DEC 2 () 1973 Operator						
	·	ELK OIL COMPANY C. C. C.				
	Address					
	BOX 310 ROSWELL, N. M. 88201 Reason(s) for filing (Check proper box) Other (Please explain)					
	New Well	Change in Transporter of:		·		
	Recompletion Change in Ownership	Oil Dry Gas Casinghead Gas Conden	=			
	If change of ownership give name			<u></u>		
	and address of previous owner					
11.	DESCRIPTION OF WELL AND I	Well No. Pool Name, Including Fo	ormation Kind of Lea	se Lease No.		
	AMOCO STATE COM	1 ROUND TANK Q	UEEN State, Fede	State, Federal or Fee T803		
Unit Letter 2 : 330 Feet From The NORTH Line and 350 Feet From The WEST						
			NACON	AVINCO County		
		1 33		AVES		
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil or Condensate Address (Give address to which approved copy of this form is to						
	Name of Authorized Transporter of Cas	Inghead Gas or Dry Gas				
		or say one				
	If well produces oil or liquids,	Unit Sec. Twp. Rge.	is gas actually connected?	vhen		
	give location of tanks.	h that from any other lease or pool,	veg	Dec 18,1973		
IV.	COMPLETION DATA		New Well Workover Deepen	Plug Back Same Restv. Diff. Restv.		
	Designate Type of Completion		New Well Worksver Deepen	Flag Back Same Nes V. Sim Nes VI		
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
	9/27/72 Elevations (DF, RKB, RT, GR, etc.,	11/17/73 Name of Producing Formation	1475 Top Cil/Gas Pay	1465 Tubing Depth		
		CUT EN	1416	1420		
	3660 GRD Perforations	Land distrib		Depth Casing Shoe		
	1416-1425 2SPF TUBING, CASING, AND CEMENTING RECORD 1465					
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
	12	8-5/8	200	100		
	8	4½ 2 3/8	1465	250		
			<u> </u>			
V.	EST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)					
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas	lifi, etc.)		
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size		
			Water - Bbls.	Gas-MCF		
	Actual Prod. During Test	Oil-Bbls.	Wdter - DDis.	Gal 1110.		
	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		
	Meter	369₩	360#	22/64		
VI.	CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION			
	I hereby certify that the rules and	regulations of the Oil Conservation	APPROVED DEC 28 1973 BY			
	Commission have been complied to above is true and complete to the	with and that the information given best of my knowledge and belief.				
	1 15	1.11				
	- 47 M	ature)	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			
PRESIDENT			tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for allow-			
	(Ti	tle)	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.			
	DEC 18	9173				
	·		Separate Forms C-104 m	ust be filed for each pool in multiply		