SA TAFE	NEW MEXICO t	AL COMPRENDEN	MISSION	Form C-104
σ ε <u>/</u> . G.S.		AND		Supersedes Old C-104 and Effective 1-1-65
D OFFICE	AUTHORIZATION TO	REC	ETVED	
GAS OPERATOR / I. PRORATION OFFICE		DEC	2 0 197 3	
Operator JEN LEADURCES, Address	lne. V		C. C. E	
	1. W. Suite 1610, Alba			
New Well Recompletion Change in Ownership	Change in Transporte. et. Oil Casinghead Gas	Other (Ple	ease explain;	
If change of ownership give name and address of previous owner	kobert H. Birdeal	1, Draler 40, Al	teolo, new Mex	i .co
II. DESCRIPTION OF WELL AN	D LEASE R - 6810 Well No. Pool Name, month	11-1-81		
Cave Ibel Unit	Cave Graybe	s st	State, Federal of Fed	
Unit Letter <u>P</u> ; 50	Feet From The South	460	Feet From The	East.
Line of Section 23 T	ownship 100 Base	292 , NMI	PM, LUCY	County
I. DESIGNATION OF TRANSPOL Name of Authorized Transporter of C	RTER OF OIL AND NATURAL	61.		
I DIJECTION MELL			s to which approved copy	y of this form is to be sent)
Name of Authorized Transporter of C	asinghead Gas or Dry Gas	Cive addres	s to which approved copy	of this form is to be sent)
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Bye	the second second	cted? When	
	with that from any other least or the			
COMPLETION DATA				
Designate Type of Completi	ion = (X)	Workover	Deepen Plug B	ack Same Res'v. Diff. Res'
Date Spudded	Date Compl. Ready to Frod.			.D.
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Gas Pay		; Depth
Perforations			: 	
			L)epth -	Casing Shoe
HOLE SIZE	TUBING, CASING A	DEFENTING RECO	RD	
	CASING & TUBING SIZE	DEPTH S	ET	SACKS CEMENT
			·····	
TEST DATA AND REQUEST F	OR ALLOWABLE (Test These in	-	i	
OIL WELL Date First New Oil Run To Tanks	able for this a	and the service of total volt	ime of load oil and must s)	be equal to or exceed top allow
		3 Method (Flor	v, pump, gas lift, etc.;	
Length of Test	Tubing Pressure		Chake S	\$12 e
Actual Prod. During Test	Oil-Bbis.	. Ci3,	Gas - MC	2F
GAS WELL			: 	
Actual Prod. Test-MCF/D	Length of Test	Et al coassate/MMCI		
Testing Method (pitot, back pr.)				of Condensate
	Tubing Pressure (Shut-in)	but .	-in) Choke S	128
CERTIFICATE OF COMPLIANC			ONSERVATION C	OMMISSION
I hereby certify that the rules and re Commission have been complied wi		APPROVED	711 17	, 19
above is true and complete to the	best of my knowledge and belief	13r light	OIL AND GAS INSPEC	, ///
			OIL AND GAS INSPEC	¥ * *
Field			be filed in compliance	With BULE 1104
ewis C. Jameson (Signature)		this is a required, this form must	est for allowable for a be accompanied by a	newly drilled or deepened
esident (Title)		Sector taken on the w	vell in accordance with	d out completely for allow-
December 11, 1970		able on new and rec	ompleted wells.	
(Date)		Sill out only Se	ections I, II, III, and	VI for changes of owner,

Will out only Sections I, II, III, and VI for changes of owner, well same or number, or transporter, or other such change of condition.