1	NO. OF COPIES RECEIVED . 6				
	DISTRIBUTION	NEW MEXICO OIL C	ONSERVATION COMMISSION	ON	Form C-104
	SANTA FE	1	FOR ALLOWABLE		Supersedes Old C-104 and C-110
	FILE		AND		Effective 1-1-65
	U.S.G.S.	AUTHORIZATION TO TRA	INSPORT OIL AND NAT	URAL GAS	
	LAND OFFICE	_			
	TRANSPORTER OIL				
	GAS				
	OPERATOR				
1.	PRORATION OFFICE Operator	L			
	JFG ENTERPRISES				
	Address STG ENTERTRIBES				
		a, New Mexico 88210			
	Reason(s) for filing (Check proper box))	Other (Please exp	lain)	
	New Well	Change in Transporter of:			
	Recompletion	Oil Dry Ga	ıs 🔲		
	Change in Ownership	Casinghead Gas Conder	nsate		
	If change of ownership give name and address of previous owner				
	DESCRIPTION OF WELL AND	LEASE			
	Lease Name	Well No. Pool Name, Including F		d of Lease	Lease No.
	Gulf-Fluss	3 East Empire Y	ates /-R Sta	te, Federal or Fee	State 2029
	Location	O Courth	220		East
	Unit Lefter P; 33	O Feet From The South Lin	ne andF	eet From The	East
	Line of Section 22 Tov	vnship 17S Range	28E , NMPM,	Eddy	County
III.	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA	is		
	Name of Authorized Transporter of Oil	or Condensate	Address (Give address to wh		
	Navajo Crude Oil Pur	chasing Co.	N. Freeman Avenue	e, Artesia,	N.M.
	Name of Authorized Transporter of Cas	singhead Gas or Dry Gas	Address (Give address to wi	ich approved copy	of this form is to be sent,
			11	When	
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. P 22 17S 28E	Is gas actually connected?	, when	
	give receiped of the same	1			
	If this production is commingled with	th that from any other lease or pool,	give commingling order nur	nber:	
	If this production is commingled wit	th that from any other lease or pool, Oil Well Gas Well			ack Same Restv. Diff. Restv.
	If this production is commingled with	th that from any other lease or pool, on - (X) Oil Well Gas Well X	New Well Workover I	Deepen Plug B	1
	If this production is commingled with COMPLETION DATA Designate Type of Completic Date Spudded	th that from any other lease or pool, Oil Well Gas Well Non - (X) X	New Well Workover I	P.B.T.	D.
	If this production is commingled with COMPLETION DATA Designate Type of Completic Date Spudded 10-12-79	th that from any other lease or pool, on - (X) Gas Well Note Compl. Ready to Prod. 12-5-79	New Well Workover I	P.B.T.	b. 837'
	If this production is commingled with COMPLETION DATA Designate Type of Completic Date Spudded 10-12-79 Elevations (DF, RKB, RT, GR, etc.)	th that from any other lease or pool, on - (X) Gas Well Date Compl. Ready to Prod. 12-5-79 Name of Producing Formation	New Well Workover I X Total Depth 851' Top Oil/Gas Pay	P.B.T. Tubing	D. 837' Depth
	If this production is commingled with COMPLETION DATA Designate Type of Completion Date Spudded 10-12-79 Elevations (DF, RKB, RT, GR, etc.) 3857.9	th that from any other lease or pool, on - (X) Gas Well Note Compl. Ready to Prod. 12-5-79	New Well Workover I	P.B.T. Tubing	B37' Depth 740'
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	If this production is commingled with COMPLETION DATA Designate Type of Completic 10-12-79 Elevations (DF, RKB, RT, GR, etc.) 3857.9 Perforations 752' - 760' - 1 shot	th that from any other lease or pool, on - (X) Date Compl. Ready to Prod. 12-5-79 Name of Producing Formation Seven Rivers per ft. (9 shots) TUBING, CASING, ANI	New Well Workover I X Total Depth 851' Top Oil/Gas Pay	P.B.T. Tubing Depth (D. 837' Depth 740' Casing Shoe
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L.D. Fletcher

Agent

12-7-79

(Title)

(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 NULE 111.

All sections of this form must be filled out completely for allowable 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.