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FILE			~	
U.S.G.S.				
LAND OFFICE				
TRANSPORTER	OIL			
	GAS	<u> </u>		
OPERATOR			_	
PRORATION OFFICE		1		

November 14, 1973

(Date)

NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE

Form C-104 Supersedes Old C-104 and C-110

	FILE	KEQ0E31 1	AND	Effective 1-1-65		
	U.S.G.S.	AUTHORIZATION TO TRAI	MEDERICOLL AND MEATURAL O	SAS .		
	LAND OFFICE		S. E. C. E. I. A. E. D			
	TRANSPORTER OIL .		1,0,4,4,4,0,70			
	GAS		NOV 1 6 1973			
	OPERATOR					
1.	PRORATION OFFICE			1		
	Operator Franklin Aston &	Franklin, Aston & Fair, Inc.				
	Address					
	P. O. Box 1090, Roswell, New Mexico 88201 Reason(s) for filing (Check proper box) Other (Please explain)					
	New Well	Change in Transporter of:				
	Recompletion	Oil XX Dry Gas	• 🖳 🗇	· ·		
	Change in Ownership	Casinghead Gas Condens	sate []			
	If change of ownership give name and address of previous owner					
11.	1. DESCRIPTION OF WELL AND LEASE Lease Name Well No. Fool Name, Including Formation Kind of Lease No.					
	Lease Name McIntyre A	4 Loco Hills Abo	l l	lorFee Federal LC054280		
	Lecation			4		
	1 1650	O Feet From The South Line	410 Feet From	The East		
	Unit Letter;;	reet riom rice				
	Line of Section 20 Tow	mship 17 South Range 30	East , NMPM,	Eddy County		
Ш.	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA	s ρ_0 $\beta_0 x$	175		
	Name of Authorized Transporter of Oil	or Condensate	Pipeline Division Nor	th Freeman Avenue,		
	Navajo Kerining Compa	HYCEUDE DIL YUKEHASIUC	Artesia, New Mexico 88 Address (Give address to which appro	ZIU wed copy of this form is to be sent)		
	Name of Authorized Transporter of Cas		1	· · · · · · · · · · · · · · · · · · ·		
	Continental Oil Compa		P.O. Box 2197, Houston Is gas actually connected? Wh	, 1exas //001		
	If well produces oil or liquids,	Unit Sec. Twp. Ege.	15 gais actually attended	April, 1961		
	give location of tanks.	<u></u>	<u></u>			
		h that from any other lease or pool,	give commingling order number:			
Off Well Gds Well flow Well Workers				Plug Back Same Resty. Diff. Resty.		
	Designate Type of Completio	on = (X)				
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
				Tuble - Doub		
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth		
				Depth Casing Shoe		
	Perforations					
		TURING CASING AND	CEMENTING RECORD			
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
	ROLE 312L					
			<u> </u>	<u> </u>		
V.	TEST DATA AND REQUEST FO	OR ALLOWABLE (Test must be a	fter recovery of total volume of load oil	and must be equal to or exceed top allow-		
V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WFIL Date of Test Date of Test Producing Method (Flow, pump, gas lift, etc.)						
Date First New Cil Run To Tanks Date of Test Producing Method (Flow, pump, gas lift, etc.)						
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size		
	Length of Tout					
	Actual Fred. During Test	Cil-Bbis.	Water - Bbls.	Gas-MCF		
GAS WELL Bbis. Condensate/MMCF Gravity of Condensate						
	Actual Pred. Test-MCF/D	Length of Test	Bris. Condensuter N.N.C.	G.C.I., G. Schall		
		Tubing Fressure (Shut-in)	Casing Pressure (Shut-in)	Cheke Size		
	Testing Method (pitot, back pr.)	Tutaling Procession (Shute-Zar)				
		O.F.	OIL CONSERV	ATION COMMISSION		
VI	CERTIFICATE OF COMPLIAN	C.E.	NOV 1 6 15	ation commission 373		
and the state of the and annulation of the Oil Consequetion		APPROVED , 19, 19				
	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. Janu P. Stiptanie. (Signature)		TITLE This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepened			
	(Sign	ature)	well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.			
	Executive Vice		Att sections of this form m	ust be filled out completely for allow		
(Title)			All sections of this form must be third out be in 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.