	~ .		
NO. OF COPICS RECEIVED		•	
DISTRIBUTION],	SERVATION COMMISSION	RECSuperiodes Old C-104 and C-
SANTA FE		R ALLOWABLE	Effective 1-1-65
FILE		AND	0.4111 2.0.1004
U.S.G.S.	AUTHORIZATION TO TRANS	SPORT OIL AND NATURAL	GASUL 5 U 1984
LAND OFFICE			O. C. D.
THANSPORTER OIL	-		ARTESIA, OFFICE
GAS	-	· L	ARTESIA, OFFILE
OPERATOR	-		
PRORATION OFFICE	J		
Belco Development	Corporation		
Address	y Road; Houston, Texas	77055	
Reason(s) for filing (Check proper box		Other (Please explain)	
New Well	Change in Transporter of:		
Recompletion	Oil Dry Gas		
Change in Ownership X	Casinghead Gas Condensa	ite	
		- "260	0 D-11 Www 75201
If change of owners tip give name and address of pre-ious owner	HOLLY ENERGY, INC.; 71	7 N.Harwood, #260	0; Dallas, 1x. 75201
I. DESCRIPTION OF WELL AND	LEASE. Well No. Pool Name, Including Form	nation Kind of Lea	nse , Lease No
Legse Name	10 Grayburg Jcks	on Queen SA State, Fode	eral or Fee Federal LC-
McINTYRE "A"		<u> </u>	057634
Location	O Feet From The South Line	2310	_{m The} East
Unit Letter 0 : 99	Feet From The SOULIT Line	ana reet r fo	•
Line of Section 20 To	ownship 17S Range	30E , NMFM,	Eddy Coun
Line of Section 20 To	Switchist TVO Manual		
T PECICNATION OF TRANSPOR	TER OF OIL AND NATURAL GAS		<u> </u>
Name of Authorized Transporter of O	or Condensate	Addiesa force against to mine at	proved copy of this form is to be sent)
Navajo Refining Compa	דן	P.O.Drawer 159, Artes	ia, N.M. 88210
Name of Authorized Transporter of Co		Address (Give address to which app	proved copy of this form is to be sent)
Conoco Inc.		Box 2199 Ho	riston, TX 77001
	Unit Sec. Twp. Pge.	Is gas actually connected?	When
If well produces oil or liquids, give location of tanks.	20 17 30	Yes	9-3-81
	rith that from any other lease or pool, g	ive commingling order number:	
V. COMPLETION DATA			Plug Back Same Resty, Diff. Re
	Oil well	New Well Workover Deepen	Plug Buck Same fies it 21117 its
Designate Type of Complet	<u> </u>		P.B.T.D.
Date Spudded .	Date Compl. Ready to Prod.	Total Depth	
		Top O!I/Gas Pay	Tubing Depth
Elevations (DF, RKB, RT, GR, etc.,	Name of Producing Formation	100 5.17 000 7 07	
		•	Depth Casing Shoe
Perforations		•	
	TUBING, CASING, AND	CEMENTING RECORD	
	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
HOLE SIZE	CASING & TUBINO SIZE		
	FOR ALLOWARIE (Task must be of	ter recovery of total volume of load	oil and must be equal to or exceed top
V. TEST DATA AND REQUEST	able for this de	pth or be for full 24 hours)	
OII, WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, go	is lift, etc.)
Date 7 Met 110 m Out 110 m			70-
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
			Gas-MCF & O
Actual Prod. During Test	Oil-Bble.	Water - Bbls.	in ha
			\ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
		*	
GAS WELL		Tobbe Condenses Andre	Gravity of Condensate
Actual Prod. Test-MCF/D	Length of Test	Bble. Condensate/MMCF	
		Casing Pressure (Shut-in)	Choke Size
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Carried 1 1000 mile (1220 12)	
		OII CONSE	RVATION COMMISSION
VI. CERTIFICATE OF COMPLIANCE			
		APPROVED AUG 0	1 1304
I hereby certify that the rules and regulations of the Oil Conservation		Original Sig	aned By
I hereby certify that the rules and regulations of the information given Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.			lements
		TITLE Supervisor District II	

(Title)

(Date)

All sections of this form must be filled out completely for all-able on new and recompleted wells. Fill out only Sections I. II. III, and VI for changes of own well name or number, or transporter, or other such change of conditions. Separate Forms C-104 must be filed for each pool in multi-completed wells.

This forms is to be filed in compfrence with RULE 1104. If this is a request for allowable for a newly drilled or deeper well, this form must be accompanied by a tabulation of the deviat tests taken on the well in accordance with RULE 111.