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SANTA FE	NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE		Form C-104 Supersedes Old C-104 and C-1
FILE / V		AND	Effective 1-1-65
U.S.G.S.	AUTHORIZATION TO TRA	NSPORT OIL AND NATURAL G	ASRECEIVED
LAND OFFICE			L D
TRANSPORTER OIL /			WW 2 0 1970
GAS	4	P	
PRORATION OFFICE	4	•	gram over
Operator			ARTESIA, OFFICE
MARIAN C. WE	LCH Z		and Graffit.
P. O. DRAWER	W - ARTESIA, NEW MEX	ICO 882IO	
Reason(s) for filing (Check proper box)	Other (Please explain)	
New Well	Change in Transporter of:		
Recompletion	Oil Dry Ga	= 1	
Change in Ownership	Casinghead Gas Conden		
If change of ownership give name	V. S. WELCH	Drawer w arter	144
and address of previous owner	VI 0. WD2011	Vianie W UN	
DESCRIPTION OF WELL AND	I FACE		
Lease Name LACKAWANNA	Well No. Pool Name, Including Fo		
LACKAWANNA	12 ARTES IA QUEEI	N GRAYBURG SA State, Federal	or Fee STATE
Location			
		and the second s	
Unit Letter B; 99	O Feet From The NORTH Lin	e and 1650 Feet From T	The EAST
J. Z.			
Line of Section 2I To	wnship ISS Range	28E , NMPM, ED	DY County
Line of Section 2I To DESIGNATION OF TRANSPOR Name of Authorized Transporter of OI NAVAJO REFINING CO.	TER OF OIL AND NATURAL GA or Condensate Live Line Div.	28E , NMPM, ED	DY County red copy of this form is to be sent; TESIA, NEW MEXICO
Line of Section 2I To DESIGNATION OF TRANSPOR Name of Authorized Transporter of OI	TER OF OIL AND NATURAL GA or Condensate Light Lime Dive. singlead Gas or Dry Gas	28E , NMPM, ED Address (Give address to which approv FREEMAN AVENUE -AR Address (Give address to which approv	DY County med copy of this form is to be sent) TESIA, NEW MEXICO med copy of this form is to be sent)
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VI. CERTIFICATE OF COMPLIANCE

Testing Method (pitot, back pr.)

GAS WELL

Actual Prod. Test-MCF/D

OIL CONSERVATION COMMISSION

Gravity of Condensate

Choke Size

- B

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.

(Date)

Tubing Pressure (Shut-in)

BY W. a. Gressett

Bbls. Condensate/MMCF

Casing Pressure (Shut-in)

This form is to be filed in compliance with RULE 1104.

MARIAN C. WELCH

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 RULE 111.

AGENT

(Title) 20/70

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