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SANTA FE /		ONSERVATION COMMISSION	Form C-104 Supersedes Old C-104 and C-
FILE /	REQUEST	FOR ALLOWABLE	Effective 1-1-65
U.S.G.S.	ALITHODIZATION TO TRA	AND	1 046
LAND OFFICE	AUTHORIZATION TO TRA	NSPORT OIL AND NATURA	L GAS
OIL /			
TRANSPORTER GAS /			RECEIVED
OPERATOR			of the second desired, where is the Continue Service.
PRORATION OFFICE			
Operator	/		DEC 3 1965
Y. S. WELCH V			
Address			17, G. C.
DRAWER W - Al	rtesia, new mexico		arteria, office
Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well	Change in Transporter of:	_ IN COMPLE.	ANOR WITH GROER
Recompletion	Oil Dry Ga		
Change in Ownership	Casinghead Gas Conden	sate	
DESCRIPTION OF WELL AND L Lease Name	EASE Lease No. Well No. Pool Nac	ne, Including Formation	Kind of Lease (029 392 6
HINKLE F	4 3	HUGAR T	State, Federal or Fee
Location	• 4	000	***
Unit Letter <u>B</u> ; <u>165</u>	Feet From TheLin	e and 990 Feet F	rom The
60		#TO	**************************************
Line of Section 27 Town	nship IBS Range	318 , NMPM,	DDY County
	UD OU ON AND NATURAL CA	0	
		S Address (Give address to which a	pproved copy of this form is to be sent)
Name of Authorized Transporter of Oil	or Condensate	Address (Give address to which a	pproved copy of this form is to be sent)
Name of Authorized Transporter of Oil ECTOOD CORPORATIO	or Condensate	Address (Give address to which a	
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Date First New Oil Run To Tanks	Date of Test Tubing Pressure	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test		Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbis.	Water - Bbls.	Gas - MCF

GAS WELL			
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
			Chaha Sign
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size

VI. CERTIFICATE OF COMPLIANCE

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.

AGENT

(Title)

2, I965 Dro.

(Date)

OIL CONSERVATION COMMISSION

1965 DEC 3 APPROVED

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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 RULE 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.