NO. OF COPIES RECEIVED	٦		
DISTRIBUTION		SERVATION COMMISSION	Form C -104 Supersedes Old C-104 and C-110
SANTA FE		OR ALLOWABLE AND	Effective 1-1-65
U.S.G.S.	AUTHORIZATION TO TRAN	SPORTEOILVANE DONTURAL GA	S
IRANSPORTER GAS		JAN 1 1 1978	
OPERATOR /	- : !		
I. PRORATION OFFICE		I. G. G.	
Petroleum Developm	ent Corporation 🖌		
Address 0720 P. Candelaria	N. E., Albuquerque, Ne	w Mexico 87112	
Reason(s) for filing (Check proper bo	x)	Other (Please explain)	
tiew Well	Change in Transporter of:		
Hecompletic: Change in Ownership	Cil Dry Gas Casinghead Gas Condens	ate	
If change of ownership give name and address of previous owner			
II. DESCRIPTION OF WELL AND	Well No. Pool Non	no	Kind of Lease Federal State, Federal or Fee
Manzano Grande Fed			East
Unit Letter <u>66</u>	O South Line	2130 Feet From Th	ne
Line o: Section 5		26E , NMPM, Ed	dy County
III. DESIGNATION OF TRANSPO	RTER OF OIL AND NATURAL GAS	Address (Give address to which approve	ed copy of this form is to be sent)
N/A			d conv of this form is to be sent.
N/A Name of Authorized Transporter of Casinghead Gas or Dry Gas XX E1 Paso Natural Gas Company Address (Give address to which approved copy of this form is to be sent) PO Box 1492, E1 Paso, Tx. 79978		o, Tx. 79978	
If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is an actually connected? When	
give location of tanks.			N/A
If this production is commingled	with that from any other lease or pool, a	give commingling order number:	· · · · · · · · · · · · · · · · · · ·
IV. COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.
Designate Type of Comple	Lion - (A) X Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
► 9/21/77	12/23/77	12052	12002
For und.	Name of Producing Formation Morrow Sand	Top Oil/Gas Pay 11282	Tubing Depth 12002
Perforations 11928-940,11	554-63,560-574:11615-26,64	6-50,659-64,668-70,693-	Depth Casing Shoe
11704,716-20,734-37,7	58-67,771-74,11282-296,113	50=360.(4 JHPF)	12052
	TUBING, CASING, ANL CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
HOLE SIZE	68#, 13-3/8''	458	450 sx 4% ge1,2% CaC1
11"	36#, 9-5/8''	1801	620 sx.C1"C",360 Sx.Poz 750 sx.C1"CH,700 sx.Lo-
7-7/8''	<u>11.6#, 4-1/2''</u>	12,052	dense.
V. TEST DATA AND REQUEST	<u>2-3/8" tubing</u> FOR ALLOWABLE (Test must be a	fter recovery of total volume of load oil	and must be equal to or exceed top allow-
OIL WELL	able for this de	epth or be for full 24 hours) Producing Method (Flow, pump, gas lij	
Date First New Oil Run To Tanks	Date of Test		·····
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbis.	Water - Bbls.	Gas-MCF
Actual Prat. During rest			L Print Po
·			2 1 5
GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
952	4 hours	n/a Casing Pressure	n/a Choke Size
Testing Method (pitot, back pr.)	Tubing Pressure	PKR	16/64
back pressure -4 pt VI. CERTIFICATE OF COMPLI		OIL CONSERVA	ATION COMMISSION
		APPROVED FEB 1 4 19	78, 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.		APPROVED, G. Gressert	
		BY SUPERVISOR, DISTRICT II	
	A		
$(I, I)_A \setminus V(I)_A$	Jun /	Truthe is a sequent for allo	compliance with RULE 1104. wable for a newly drilled or deepened
- M VM	Signature)	If this is a request for allo well, this form must be accomp tests taken on the well in acco	anied by a tabulation of the deviation
Secretary	V	All sections of this form m	ust be filled out completely for allow
	(Title) able on new and recompleted wells.		
1/9/78	(Date)	well name or number, or transpo	rter, or other such change of condition

well name or number, or transporter, or other such change of cor Separate Forms C-104 must be filed for each pool in multiply

(Date)