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SANTA FE	17				
FILE					
U.S.G.S.		//	-		TUA
LAND OFFICE		-	-	′	101
TRANSPORTER	O1L GAS	+			
OPERATOR	<u> </u>	TÍ.	\vdash		
PRORATION OF	FICE	 	+		
Operator		1	I L		
Wagens	eller	and	Au	ous t	
Address				,	
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Reason(s) for filing					
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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-104

	SANTA FE	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-11 Effective 1-1-65			
	FILE U.S.G.S.	AUTHORIZATION TO TRA	AND ANSPORT OIL AND NATURAL				
	LAND OFFICE	AUTHORIZATION TO TRA	ANSPORT OIL AND NATURAL	_ GAS			
	I RANSPORTER OIL						
	GAS /	-					
	OPERATOR	-					
I.	PRORATION OFFICE Operator	<u> </u>		· · · · · · · · · · · · · · · · · · ·			
	Wagenseller and Au	igust		i			
	Address						
		Drive, Beverly Hills, Ca					
	Reason(s) for filing (Check proper box) Change in Transporter of:	Other (Please explain)				
	Recompletion	Oil Dry Ga	ts				
	Change in Ownership	Casinghead Gas Conden	nsate				
	If change of ownership give name						
	and address of previous owner		-				
TY	DESCRIPTION OF WELL AND	I E ACE					
11.	DESCRIPTION OF WELL AND Lease Name	Weil No. Pool Nar	me, Including Formation	Kind of Lease			
	Mobil Apache 168 -	10-1 Sout	th Blanco-Pictured Cli	ffg State, Federal or Fee Indian			
	Location	•					
	Unit Letter;;	50 Feet From The South Lin	ne and 790 Feet Fro	om The East			
	Line of Section 13 , Tov	wnship 23N Range 3	NMPM,	Rio Arriba County			
	Line of Section , 100	who have a second	, , , , , , , , , , , , , , , , , , , ,				
III.		TER OF OIL AND NATURAL GA					
	Name of Authorized Transporter of Oil	or Condensate	Address (Give address to which app	proved copy of this form is to be sent)			
	Name of Authorized Transporter of Cas	singhead Gas 🛣 or Dry Gas	Address (Give address to which ap)	proved copy of this form is to be sent)			
	El Paso Natural Gas	-	Box 990. Farmington, I				
	If well produces oil or liquids,	Unit Sec. Twp. Rge.		When			
	give location of tanks.		No				
		th that from any other lease or pool,	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 Completion	$\operatorname{pn} = (X)$	X				
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.			
	11-14-64	11-18-64	3150	3140			
	Pool	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth			
	South Blanco Perforations	Pictured Cliffs	3094	Depth Casing Shoe			
	3094 - 3104			3140			
		TUBING, CASING, AND	CEMENTING RECORD				
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT			
	12 ½ 7 7/8	8 5/8 4 1/2	103 3140	90			
	7 770	2 3/8	3101	Tubing			
V.	TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a		oil and must be equal to or exceed top allow-			
	OIL WELL Date First New Oil Run To Tanks	able for this de	epth or be for full 24 hours) Producing Method (Flow, pump, gas	s lift, etc.)			
	Date First New Oil Huit To Tailes	bate of Test	. roddong manou (2 rom, pamp) gard				
	Length of Test	Tubing Pressure	Casing Pressure	Choke Sife			
				/RELLIVED /			
	Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Ggs-MCT			
				MAR 1 5 1965			
	GAS WELL			OIL CON.			
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Contactate3			
	649	3 hours	•				
	Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size			
	Choke	893	897	3/4 THC			
VI.	CERTIFICATE OF COMPLIAN	CE		VATION COMMISSION			
	I hereby certify that the rules and	regulations of the Oil Conservation	APPROVED JUL 8	, 19			
	Commission have been complied v	with and that the information given	Original Signed Emery C. Arnold				
	above is true and complete to the	e best of my knowledge and belief.	Supervisor Dist. # 8	3			
			TITLE Supervisor Disc #	-			
	'Original Sign	of Lag	This form is to be filed i	in compliance with RULE 1104.			
	**		1	If this is a request for allowable for a newly drilled or deepened			
			If this is a request for al	lowable for a newly drilled or deepened			
	MORAIS (Sign	ature) M. B. Jones	well, this form must be accome tests taken on the well in ac	npanied by a tabulation of the deviation cordance with RULE 111.			
	Engineer	ature)	well, this form must be accomtests taken on the well in ac All sections of this form	npanied by a tabulation of the deviation cordance with RULE 111. must be filled out completely for allow-			
		ature)	well, this form must be accomtests taken on the well in ac All sections of this form able on new and recompleted	npanied by a tabulation of the deviation cordance with RULE 111. must be filled out completely for allow-			

Fill out Sections I, II, III, and VI only 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.