DISTRIBUTION		
NTA FE		
E		
.S.G.S.		
ND OFFICE		
RANSPORTER	OIL	
	GAS	
ERATOR		
ORATION OFFICE		

P O BOX 2088
SANTA FE NEW MEXICO 87501

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

erator
W.B. Wait and Associates

dress
709 N. Butler Farmington N.M. 87401

son(s) for filing (Check proper box) Other (Please explain)

- w Well
- Completion
- nge in Ownership

Change in Transporter of:
- Oil
- Dry Gas
- Casinghead Gas
- Condensate

First Delivery of Natural Gas

nange of ownership give name
address of previous owner

SCRIPTION OF WELL AND LEASE

ase Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Wait William	23	S. Tindith-Gallup Dakota Ext	State, Federal or Fee [redacted]	362

ation

Unit Letter F : 1745 Feet From The North Line and 1190 Feet From The West

ine of Section 7 Township 23N Range 4W NMPM. Rio Arriba County

IGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

e of Authorized Transporter of Oil [X] or Condensate [ ] — Address (Give address to which approved copy of this form is to be sent)
Giant Refining Co. — P.O. Box 256 Farmington N.M. 87499

of Authorized Transporter of Casinghead Gas [X] or Dry Gas [ ] — Address (Give address to which approved copy of this form is to be sent)
El Paso Natural Gas Co — P.O. Box 1492, El Paso Texas 79978

. produces oil or liquids, ocation of tanks.	Unit	Sec.	Twp.	Rge.	is gas actually connected?	When
	F	7	23N	4W	Yes	10 30 84

production is commingled with that from any other lease or pool, give commingling order number

PLETION DATA

Designate Type of Completion — (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Resv.	Diff. Resv.

Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
ions (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
ations			Depth Casing Shoe

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)
ELL

rst New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
of Test	Tubing Pressure	Casing Pressure	Choke Size
Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

ELL

Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

FICATE OF COMPLIANCE

I certify that the rules and regulations of the Oil Conservation have been complied with and that the information given is true and complete to the best of my knowledge and belief.

W.B. Wait Jr.
(Signature)
Operator
(Title)
Nov. 14, 1984
(Date)

OIL CONSERVATION DIVISION

APPROVED NOV 20 1984, 19
BY Frank T. Chavez
TITLE SUPERVISOR DISTRICT # 3

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.