

FILE		
S.G.S.		
AND OFFICE		
TRANSPORTER	OIL	
	GAS	
PERATOR		
ORATION OFFICE		
erator		

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Supersedes Old C-104 and
Effective 1-1-83

Chace Oil Company, Inc.
313 Washington SE, Albuquerque, NM 87108

Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input type="checkbox"/>	
Completion <input type="checkbox"/>	Change in Transporter of: Oil <input checked="" type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

Change of ownership give name
address of previous owner

DESCRIPTION OF WELL AND LEASE				
Well Name Jicarilla 71	Well No. 23	Pool Name, including Formation South Lindrith Gallup Dakota	Kind of Lease Jicarilla State, Federal or Fee Indian	Lease 71

Unit Letter 'F'	: 1805 Feet From The north Line and 2255 Feet From The west				
Line of Section 10	Township 23N	Range 4W	NMPM,	Rio Arriba	Co.

SIGNATURE OF TRANSPORTER OF OIL AND NATURAL GAS					
Signature of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>		Address (Give address to which approved copy of this form is to be sent)			
Petro Source Corporation		8777 E. Via de Ventura, Ste. 100, Scottsdale, AZ 85258			
Signature of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>		Address (Give address to which approved copy of this form is to be sent)			
El Paso Natural Gas Company		P. O. Box 1492, El Paso, TX 79978			
Well produces oil or liquids, or location of tanks.	Unit F	Sec. 10	Twp. 23N	Range 4W	Is gas actually connected? When

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

COMPLETION DATA									
Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'r.	Diff. I	Diff. II
Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.						
Drillations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth						
Drillations	Depth Casing Shoe								

TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

TEST DATA AND REQUEST FOR ALLOWABLE			
(Test must be after recovery of total volume of load oil and must be equal to or exceed top able for this depth or be for full 24 hours)			
First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

S WELL			
Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MCF/D	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION	
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given is true and complete to the best of my knowledge and belief.		APPROVED <u>DEC 31 1986</u>	
<u>D. W. New</u> (Signature)		BY <u>Frank J. [Signature]</u>	
President		SUPERVISOR DISTRICT 8	
<u>DEC 29 1986</u> (Date)		TITLE _____	
		This form is to be filed in compliance with RULE 1104.	
		If this is a request for allowable for a newly drilled or deep well, this form must be accompanied by a tabulation of the down tests taken on the well in accordance with RULE 111.	
		All sections of this form must be filled out completely for use on new and recompleted wells.	
		Fill out only Sections I, II, III, and VI for changes of a well name or number, or transporter, or other such change of conditions. Separate Forms C-104 must be filled for each pool in a	