STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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BAMTA PE		Γ	
PILE			Π
U.S.O.A.		Г	
LAHO OFFICE		Γ	
TRANSPORTER	OIL		
	44		
OPERATOR			
PRORATION OFF	×C8		

OIL CONSERVATION DIVISION P. O. BOX 2028 SANTA: FE, NEW MEXICO 87501



Separate Forms C-104 must be filed for each pool in multiply

REQUEST FOR ALLOWABLE AND

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Robert L. Bayless							ļ
Address							
P.O. Box 168, Farmi	ngton,	NM 874	.99				
Rooson(s) for filing (Check proper box)					Other (Please	e explain)	
X New Well	Change I	a Transporte	er of:			•	
Recompletion	on		i	Dry Gas			
Change in Quesarship	Cess	ingheed Gas		Condensate			
If change of ownership give name and address of previous owner							
II. DESCRIPTION OF WELL AND I							
Locas Name	1	Pool Name	, including	Formation		Kind of Lease	Lease No.
Natani	#34	Rusty	7 Chacra	ì		State Federal or Fee Navajo	Noo-C-5760
Unit Letter G : 1841	Feet Fre	The No	orth u	Ine and	450	_ Feet From The _ East	
Line of Section 12 Townsh	a 21 1	North	Range	6 West	, NMPM	. Sandoval	County
Name of Authorized Transporter of Casings Northwest Pipeline If well produces oil or liquids, give location of tanks.	Corp.		Gas 🔀	P.O. B	OX 8900,		4108-0900
f this production is commingled with th NOTE: Complete Parts IV and V on		•	-	, give comm			
71. CERTIFICATE OF COMPLIANCE		onservation D	ivision have	APPRO		ONSERVATION DIVISION FEB	1.8 1986
een complied with and that the information given when the second	ren is true ar	nd complete to	o the best of	BY		Original Signed by FR.	ANK T. CHAVEZ
To your Signature)	' '-	<u> </u>		ll u	his is a requ	be filed in compliance with RUL est for allowable for a newly dril	lled or deepened
Operator (Tule)				teets ta	ken on the w sections of	be accompanied by a tabulation well in accordance with RULE 11 this form must be filled out compl completed wells.	11.
2-6-86 (Dec)						ections I, II, III, and VI for che or transportes or other such chan	

completed wells.

V. COMPLETION DATA			- W. 15	New Well	Workpyer	Deepen	Plug Back	Same Res'v.	Dill. Res'v.		
Designate Type of Comple	tion – (X)	Off Mell	Gas Well	X	1		!		! !		
		Date Compl. Reedy to Prod.			Total Depth			P.B.T.D.			
ero Spudded		1-16-86			1950'			1918'			
1-6-86 Develope (DF, RKB, RT, GR, etc.					Top Oll/Gas Pay			Tubing Depth			
	· .	Chacra			1709'						
7032 GL		1718-1748, 1752-1758, 180			02-1810 1814-1818		Depth Casing Shoe				
	, 1/18-1/	40, 1/04	Z-1/JO, I	002 1010,			195	8'			
53'	53 holes	TURING	, CASING, AN	D CEMENT	NG RECOR	D					
	545	ING & TUE			DEPTH SET		SACKS CEMENT				
HOLE SIZE	<u> </u>	7"			100'			50 sx Class B w/2% CaCl			
9-7/8"	}		Q II		1958'		175 sx	Class B	2% Econo		
6-1/4"		2-7/8"						100 sx 50-50 pozmix 2%			
	}				•		iael & 1	0% salt			
V. TEST DATA AND REQUE OIL WELL Date First New Cil Run To Tonke	Dete of To		(Test must be able for this i	lepth or be for Producing	full 24 hours	, pump, ene	lift, ota.)				
Longth of Tool	Tubing Pt	resoure.		Control Pro	Coaing Pressure		Choke Size				
Actual Pred, During Teet	Oil-Bhis.	<u>, , , , , , , , , , , , , , , , , , , </u>		Water - Bbi	<u> </u>		Ges-MCF				
GAS WELL											
Actual Prod. Tool-MCF/D	Langth of	Tool		Bhis. Com	enegte/NMC	F	Grevity of	Condensete			
1208		3 hi	rs				Choke Sin				
Testing Method (pitet, back pr.)	Tubing Pr	PROUPO (EDM	e-in)	Casing Pro	oeure (Shat	-1 2	Chore all	3/4"			
back pressure	j				260			<u> </u>			

back pressure