HO. OF CUPIES RECEIVED		4	
DISTRIBUTION			
SANTA FE		1	
F:LE		1	
U.S.G.S.			
LAND OFFICE			
FRANSPORTER	OIL		
	GAS	1	
OPERATOR		/	
PRORATION OFFICE			
^			

HO. OF CUPIES RECEIVED 4				
DISTRIBUTION				
SANTA FE /		NEW MEXICO OIL CONSERVATION COMMISSION Form C-104 REQUEST FOR ALLOWABLE Supersedes Old C-104 and		
FILE.	REQUEST		Supersedes Old C-104 and C-1. Effective 1-1-65	
U.S.G.S.	AUTUONIZATION TO TO	AND		
LAND OFFICE	AUTHORIZATION TO TR	ANSPORT OIL AND NATURA	AL GAS	
OIL				
TRANSPORTER GAS /				
			OF I IN	
OPERATOR /			CAFI FIVEN	
PROMATION OFFICE			KLULITLU	
	TION COMPANY		/ 1.2-	
Address			1AN 2 1974	
	Drive, Farmington, New Me	exico 87401		
Reason(s) for filing (Check proper b			OIL CON COM	
New West		Other (Please explain)	DIST. 3	
	Change in Transporter of:	T X C		
Recompletion	Ott Dry G Castnahead Gas Conde			
Change in Ownership	Casinghead Gas Conde	ensate []		
If change of ownership give name and address of previous owner I. DESCRIPTION OF WELL AN Lease Name Jicarilla Contract 1	D LEASE. Well No. Pool Name, Including F	ł	Lease Federal Lease No. ederal or Fee Jic. Contract 146	
Location				
C	99A	1650	***	
Unit Letter C;	990 Feet From The North Li	ne and LOOU Feet F	rom The West	
1 1 5 1 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	Cownship 25-N Range	5-W , NMPM,	Rio Arriba County	
Line of Section	Township 22 N Range	J-# , 14101-101,	Rio Arriba County	
L SECTOMATION OF TRANSPO	RTER OF OIL AND NATURAL GA	A C		
Name of Authorized Transporter of C			pproved copy of this form is to be sent)	
Kems of Addisorder			, , , , , , , , , , , , , , , , , , ,	
Name of Authorized Transporter of C	Casinghead Gas or Dry Gas 🛣	Address (Give address to which a	pproved copy of this form is to be sent)	
Northwest Pipeline Co		· •	Farmington, New Mexico 874	
	Unit Sec. Twp. Rge.	Is gas actually connected?	When	
If well produces oil or liquids,	Onte Sec. Twp. Tige.	Yes	5-14-57	
give location of tanks.				
	with that from any other lease or pool,	give commingling order number:		
7. COMPLETION DATA	Oil Well Gas Well	New Well Workover Deeper	Plug Back Same Res'v. Diff. Res'v.	
Designate Type of Comple	tion - (X)			
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
Date Space	2 1.0 Comp. 115227 10 1 1521			
Elevations (DF, RKB, RT, GR, etc.	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
Lievations (DI', RRB, RI', GR, etc.	, realize of Floadsing 1 simulation	100 311, 222 12;		
5 (Depth Casing Shoe	
Perforations			Depth Casing shoe	
		D CEMENTING RECORD		
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
:				
		<u> </u>	i	
. TEST DATA AND REQUEST	FOR ALLOWABLE (Test must be a		loil and must be equal to or exceed top allow	
OIL WELL	able for this di	epth or be for full 24 hours)	2.6	
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, g	as ujt, etc.j	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
Actual Prod. During Test	Oil-Bels.	Water - Bbls.	Gds-MCF	
GAS WELL				
Actual Prod. Test-MCF/D			Gravity of Condensate	
	Length of Test	Bbls. Condensate/MMCF	Gravity or consensate	
	Length of Test	Bbls. Condensate/MMCF		
	Length of Test Tubing Pressure (Shut-in)	Bbls. Condensate/MMCF Casing Pressure (Shut-in)	Choke Size	
Testing Method (pitot, back pr.)		Casing Pressure (Shut-in)	Choke Size	
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
Testing Method (pitot, back pr.) CERTIFICATE OF COMPLIA	Tubing Pressure (Shut-in) NCE	Casing Pressure (Shut-in) OIL CONSER		
Testing Method (pitot, back pr.) I. CERTIFICATE OF COMPLIA I hereby certify that the rules and Commission, have been complied	Tubing Pressure (Shut-in) NCE d regulations of the Oil Conservation with and that the information given	OIL CONSER	Choke Size RVATION COMMISSION FEB 7 1974	
Testing Method (pitot. back pr.) CERTIFICATE OF COMPLIA I hereby certify that the rules and Commission have been complied	Tubing Pressure (Shut-in) NCE	OIL CONSER	Choke Size	
Testing Method (pitot, back pr.) CERTIFICATE OF COMPLIA I hereby certify that the rules and Commission have been complied	Tubing Pressure (Shut-in) NCE d regulations of the Oil Conservation with and that the information given	Casing Pressure (Shut-in) OIL CONSER APPROVED FEB BY Original Signs	Choke Size RVATION COMMISSION FEB 7 1974 ed by A. R. Kendrick	
Testing Method (pitot. back pr.) CERTIFICATE OF COMPLIA I hereby certify that the rules and Commission have been complied	Tubing Pressure (Shut-in) NCE d regulations of the Oil Conservation with and that the information given he best of my knowledge and belief.	OIL CONSER APPROVED FR BY Original Signs	Choke Size RVATION COMMISSION 7 1074 1974	

VI.

G. L. HAMILTON

(Signature)

Area Administrative Supervisor

(Title)

(Date)

December 28, 1973

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.