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U.S.G.S.		
LAND OFFICE		
OIL	7	
GAS		
OPERATOR		
PRORATION OFFICE		
	OIL	OIL / GAS

## NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE

Form C-104 Supersedes Old C-104 and C-110

FILE /		AND	Effective 1-1-65
U.S.G.S.	AUTHORIZATION TO T	RANSPORT OIL AND NATUR	RAL GAS
TRANSPORTER GAS			
OPERATOR 2			•
PRORATION OFFICE			,
Operator	N-MONTIN-GREER DRILL	ING GODD	·
Address	M-MONITH-GREEK DRILLI	LNG CORP.	· ,
221 PETROLE	CUM CENTER BUILDING, E	FARMINGTON. NEW MED	XICO 87401
Reason(s) for filing (Check proper	box)	Other (Please explain	
New Well	Change in Transporter of:	•	well name following sixt
Recompletion		Gas   expansion of	of Niobrara-Greenhorn
Change in Ownership	Casinghead Gas Cond	densate     Participati	ing Area
If change of ownership give nan	ie .		
and address of previous owner_			
I. DESCRIPTION OF WELL A	ND LEASE		
Lease Name	Well No. Pool Name, Including	Formation Kind of	Lease No.
CANADA OJITOS UNI	T 12 WEST PUERI	O CHIQUITOMANE, State, I	Federal or Fee Federal NM 04368
	505	0.0.5	
Unit Letter A;	525 Feet From The north L	Line and 825 Feet	From The <u>east</u>
Line of Section 22	Township 25N Range	lw , nmpm,	Rio Arriba County
		7 2 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	RIO AFFIDA County
DESIGNATION OF TRANSPO	ORTER OF OIL AND NATURAL O		
Name of Authorized Transporter of Shell Pipe Line C	<del>_</del> —		approved copy of this form is to be sent)
	Casinghead Gas or Dry Gas		Ington, New Mexico
Transfer of	None	Address (Give address to which	approved copy of this form is to be sent)
If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected?	When
give location of tanks.	A 22 25N 1W	No	1
If this production is commingled	with that from any other lease or pool	1. give commingling order number	
. COMPLETION DATA			
Designate Type of Comple	etion - (X)	New Well Workover Deepe	en Plug Back Same Restv. Diff. Restv.
Date Spudded	Date Compl. Ready to Prod.		
Date Spadded	Date Compt. Reddy to Prod.	Total Depth	P.B.T.D.
Elevations (DF, RKB, RT, GR, etc	.; Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
			Taking Depti.
Perforations			Depth Casing Shoe
		D CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	OEPTH SET	SACKS CEMENT
	·		
TEST DATA AND REQUEST	FOR ALLOWABLE (Test must be	after recovery of total volume of loa	d oil and must be equal to or exceed top allow-
OIL WELL	able for this o	iepth or be for full 24 hours)	•
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, g	gas lift, etc.)
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
		Casing Freeze	Chord Size KLULL 7 LLD
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas - MCI
	·		AUG 17 KA
			01 0120 0130
GAS WELL			1012 0102 3
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubia Bassacia		
realing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
CERTIFICATE OF COURT		<u> </u>	
CERTIFICATE OF COMPLIA	NCE	OIL CONSE	RVATION COMMISSION
I hereby contifu that the sules as	d'annulations of the Oil Government	APPROVED.	AUG 1 7 1970
Commission have been complied	d regulations of the Oil Conservation I with and that the information given	en l	
above is true and complete to	the best of my knowledge and belief.		
		TITLE PETROLEUM EN	GINEER DIST. NO. 5
1 1/1	' tot I	#	
11011	to mills	•	in compliance with RULE 1104. Illowable for a newly drilled or deepened
(Si	gnature)	well, this form must be acco	empanied by a tabulation of the deviation
/ Vice-	President	tests taken on the well in a	
•	Title)	All sections of this form	n must be filled out completely for allow- d wells.
	13, 1970	Fill out only Sections	I, II, III, and VI for changes of owner,
(	Date)	well name or number, or trans	porter, or other such change of condition.

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