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U.S.G.5.			ļ 	
LAND OFFICE			<u> </u>	
IRANSPORTER	OIL	1	<u> </u>	
	GAS	Γ_{L}		
OPERATOR				
		1	[

	SANTA FE /	REQUEST	ONSERVATION COMMISSION FOR ALLOWABLE AND INSPORT OIL AND NATURAL G	Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65		
	U.S.G.S. LAND OFFICE IRANSPORTER OIL / GAS / OPERATOR /	AUTHORIZATION TO TRA	MOPORT OIL AND NATURAL G	A3		
1.	PRORATION OFFICE					
	Merrion & Bayless					
	P. O. Box 1541, Farmington, New Mexico 87401					
į	Reason(s) for filing (Check proper box) Other (Please explain)					
	New Well	Change in Transporter of:				
	Recompletion	Oil Dry Go				
	Change in Ownership	Casinghead Gas Conder				
	If change of ownership give name and address of previous owner					
11.	DESCRIPTION OF WELL AND	Well No. Pool Name, Including F	ormation Kind of Lease	i _ 1		
	Canada Mesa	3 Basin-Dakota	State, Federa	or Fee Federal SF-079086		
	Location	• W	ne and 790 Feet From S	The II		
	Unit Letter A : 790	U Feet From The N Lin	ne and 199 reet rions			
	Line of Section 14 Tox	wnship 24N Range 6W	, NMPM, Pio	Arriba County		
		and Asin Stamun Al Ci	A C			
Ш.	DESIGNATION OF TRANSPOR'	or Condensate	Madicoo (Otto ===::::			
	The Permian Coropration	n	Petroleum Plaza Bldg., Address (Give address to which appro-	Fafmington, N. M. 87401		
	Name of Authorized Transporter of Ca EI Paso Natural Gas Co	singhead Gas or Dry Gas 📉 mp any	P. O. Box 990, Farming	ton, New Mexico 87401		
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. A 14 24 6	Is gas actually connected? Wh Yes-Temporarily			
	If this production is commingled wi	th that from any other lease or pool,	, give commingling order number:	R-4651		
IV.	COMPLETION DATA Designate Type of Completic	Oli Well Gas Well	New Well Workover Deepen	Plug Back Same Resty. Diff. Resty.		
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
	May 25, 1973	December 27, 1973	6 7 25	6697 Tubing Depth		
	Elevation (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	6630		
	6435 GL		e 5422	Depth Casing Shoe		
	6500-6570, 6320-26, 5422-5556 6727					
			DEPTH SET	SACKS CEMENT		
	HOLE SIZE	CASING & TUBING SIZE	1801	150		
	12-1/4"	9-5/8"	6725'	1100		
	7-7/8"	2=3/8"	6630			
			1 1	and must be suite by Army op allow-		
V	TEST DATA AND REQUEST F	FOR ALLOWABLE (Test must be able for this c	after recovery of total volume of load oil depth or be for full 24 hours)	OFLIVED		
	OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas l	ift, etc/)		
			Casing Pressure	Choke SIRAN 3 19/4		
	Length of Test	Tubing Pressure	Cdaniy / 1005_1			
	Actual Prod. During Test	Oil-Bhis.	Water - Bbls.	Gan NOHL CON. COM. DIST. 3		
	Actual			DIST. 6		
	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate		
	1.700*	24 hrs. Tubing Pressure (Shut-in)	Still recovering load	Choke Size		
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-ih) 1850	211		
	Back pressure			ATION COMMISSION		
VI	. CERTIFICATE OF COMPLIA	NCE	JAN	3 1974 19		
I hereby certify that the rules and regulations of the Oil Conservation			APPROVED, 13			
	I hereby certify that the rules and regulations of the information given Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		BY Original Signed by Emery C. Arnold			
above is true and complete to the south in t		TITLE SUPERVISOR DIST. #3				
	7000		This form is to be filed in	compliance with RULE 1104.		
	Joseph Z	Buck	If this is a request for all	owable for a newly drilled or deepens		
	(54	gnature)	well, this form must be accompanied taken on the well in accompanied to the second test and the second test are taken on the well in accompanied to the second test are taken on the well in accompanied to the second test are taken on the second test	penied by a tabulation of the deviation		

well, this form must be accompanied by the state 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. Co-Omer (Title) January 2, 1974

(Date) will test into purchaser pipeline system and will file amended report *Estimated volume