NO. OF COPIES RECE	IVED		
DISTRIBUTIO			
SANTA FE			
FILE		L	
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
I RANSFORTER	G A S		<u> </u>
OPERATOR			
PRORATION OFFICE		<u>L</u>	<u> </u>
Operator			
Chace O	il-C	omp	ar

- - - -	DISTRIBUTION SANTA FE FILE	REQUEST FO	NSERVATION COMMISSION OR ALLOWABLE AND SERVET ON AND MATURAL GA	Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65	
	U.S.G.S. LAND OFFICE IRANSPORTER GAS OPERATOR	AUTHORIZATION TO TRAN	SPORT OIL AND NATURAL GA	RESTA	
1.	PRORATION OFFICE			Sc	
	Chace Oil Company Address 313 Washington, S Reason(s) for filing (Check proper box)	, Inc. E, Albuquerque, NM	87108 Other (Please explain)	100 100 100 100 100 100 100 100 100 100	
	New We!! Recompletion	Change in Transporter of: Oil Dry Gas	WORKOVER		
	Change in Ownership	Casinghead Gas Condens	ate		
	If change of ownership give name and address of previous owner				
11.	DESCRIPTION OF WELL AND L Lease Name Jicarilla 70	10 S. Lindrith -	- Gallup Dakotta Foderal	or Fee Indian 70	
	Location "C" 66	Feet From The NL Line	and 1650 Feet From T	The WL	
			4W , NMPM, Ri	o Arriba County	
	Eine of Section	AND MATURAL CA	s		
111	Name of Authorized Transporter of Oil The Permian Corporations of Authorized Transporter of Case	Permian (Eff. 9 / 1 / 6/)	P. O. Box 1702, Fa	ed copy of this form is to be sent)	
	El Paso Natural Ga	s Company	P. O. Box 1492, E. Is gas actually connected?	l Paso, TX /99/8	
	If well produces oil or liquids,	C 34 24N 4W	No		
	If this production is commingled wit	h that from any other lease or pool,	give comminging order number.	Plug Back Same Res'v. Diff. Res'v.	
17	V. COMPLETION DATA Designate Type of Completic	on - (X) Oil Well Gas Well	X	Y P.B.T.D.	
	Date Spudded	Date Compl. Ready to Prod. 6-20-81 WC 8-12-62	Total Depth 7376	6815'	
	4-30-81 Elevations (DF, RKB, RT, GR, etc.,	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
	6991 GR	Tocito Gallup	6018' and 6702'	6700 Depth Casing Shoe	
	Perforations			6700'	
6018'-6200' 6702'-6762' TUBING, CASING, AND CEMENTING RECORD					
	0.5.5175	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
	HOLE SIZE	8 5/8"	208'	150 750 730	
	7 7/8"	4 1/2"	7368' 6700'	730	
		2 3/8" (tbg.)			
,	V. TEST DATA AND REQUEST F	able for this d	after recovery of total volume of load of lepth or be for full 24 hours) Producing Method (Flow, pump, gas	land must be equal to or exceed top allow	
	Date First New Cil Run To Tanks	Date of Test	Pumping		
	W/O 8-12-82	8-24-82 Tubing Pressure	Casing Pressure	Choke Size	
	Length of Test 24 hours	160	195	2" Ggs-MCF	
	Actual Prod. During Test	Oil-Bbls.	Water-Bbis.	100	
	120	25 40	.95 60	1 100	
	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbis. Condensate/MMCF	Gravity of Condensate	
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
,	VI. CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION APPROVED SEP 17 1982		

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

B.W.	Miller)
President	
	(Title)

September 15,

1982

Priginal Signed by CHARLES GHOLSON

TITLE DEPOSY OR & CAS HENECTOR, DIST. #3

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 allow able 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

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