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LAND OFFICE		
TRANSPORTER	OIL	/
	GAS	
OPERATOR		2
PRORATION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

INLAND CORPORATION PURCHASED ALL THE ASSETS  
AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS  
OF BOTH LAMAR TRUCKING AND INLAND CRUDE,  
INC. THIS PURCHASE INCLUDES M. S. C. C.  
PERMIT # 670 WHICH HAS BEEN TRANSFERRED TO  
INLAND CORPORATION.

CLYDE C. LAMAR, PRESIDENT

I. Operator		INLAND CORPORATION	
BENSON-MONTIN-GREER DRILLING CORP.			
Address		158 Petroleum Center Building, Farmington, New Mexico	
Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well	<input type="checkbox"/>	Change in Transporter of:	
Recompletion	<input type="checkbox"/>	Oil	<input checked="" type="checkbox"/>
Change in Ownership	<input type="checkbox"/>	Dry Gas	<input type="checkbox"/>
		Casinghead Gas	<input type="checkbox"/>
		Condensate	<input type="checkbox"/>

If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name	SCHWERTFEGER	Well No.	1	Pool Name, Including Formation	Bisti Lower Gallup	Kind of Lease	State, Federal or Fee	Federal
Location								
Unit Letter	G	1980	Feet From The	north	Line and	1980	Feet From The	east
Line of Section	17	Township	24N	Range	9W	NMPM,	San Juan	County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil	<input checked="" type="checkbox"/>	or Condensate	<input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)		
Lamar Trucking, Inc.				Box 1528, Farmington, New Mexico		
Name of Authorized Transporter of Casinghead Gas	<input type="checkbox"/>	or Dry Gas	<input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)		
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.	
Date Spudded	Date Compl. Ready to Prod.	Total Depth		P.B.T.D.						
Pool	Name of Producing Formation	Top Oil/Gas Pay		Tubing Depth						
Perforations					Depth Casing Shoe					
TUBING, CASING, AND CEMENTING RECORD										
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT					

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-Bbls.

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gas-Bbls.
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size

VI. CERTIFICATE OF COMPLIANCE

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.

*Albert R. Greer*  
(Signature)

Vice-President

(Title)

March 9, 1965

(Date)

OIL CONSERVATION COMMISSION

APPROVED MAR 10 1965

BY Original Signed Emery C. Arnold  
Supervisor Dist. # 2

TITLE

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 Sections I, II, III, and VI only 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.

