| A 100 - 100 - 140 - 140 - 140 - 140 - 140 - 140 - 140 - 140 - 140 - 140 - 140 - 140 - 140 - 140 - 140 - 140 - | - | | | |
|--|--|--|--|--|
| PECEIVED 5 | | | | |
| A: A. / | | IL CONSERVATION COMMISSION EST FOR ALLOWABLE AND | Form C-104 Supersedes Old C-104 and C-116 Effective 1-1-55 | |
| U.S.G.S. | | TRANSPORT OIL AND NATUR | | |
| IRAMSPORTER OIL / | INLAI | ND CORPORATION PURCHASED | ALL THE ASSETS - Atlantic | |
| OPERATOR , | INC. | THIS PURCHASE INCLUDED N. M. | S C C Continental | |
| PRORATION OFFICE | PERMI | T # 670 WHICH HAS BEEN TRAI | NSFERRED TO | |
| erate: | INLAN | ID CORPORATION, | | |
| Ather: | pany | INLAND COR | MAR, PRESIDENT | |
| Rea on(s) for filing (Check proper be | - Durango, Colorado | | | |
| The state of the s | Change in Transporter of: | Other (Please explain | • | |
| men my letter | | Shut in. Rec Effective Fir | quest Authority to Transpert rst Delivery | |
| If change of ownership give name and address of previous owner | | No. of the last of | | |
| II. L'ESCRIPTION OF WELL AND | | l Name, Including Formation | Kind of Lease | |
| Jicarilla "A" | 3 | Dakota | State, Federal or Fee Federa | |
| ation | | | | |
| Unit Letter A; | 900 Feet From The North | Line and 990 Feet | From The East | |
| Line of Section 19 T | ownship 26-N Range | NMPM, R | tio Arriba unty | |
| E DECICNATION OF TRANSPOR | TER OF OUR AND NATURAL | | | |
| II. DESIGNATION OF TRANSPOR | | | approved copy of this form is to be sent, | |
| Hema:, Inc. | | Box 1528 - Farming | Box 1528 - Farmington, New Mexico Address (Give address to which approved copy of this form is to be sent) | |
| Southern Union Gas | | i | 208 Apache - Farmington, New Mexico | |
| If well produces oil or liquids, | Unit Sec. Twp. Rge. | Is gas actually connected? | When | |
| give location of tanks, | A 19 26 19 | | Upon Approval | |
| If this production is commingled w V. COMPLETION DATA | ith that from any other lease or po | ool, give commingling order number | | |
| Designate Type of Complete | X | X | | |
| Date Spudded 8-24-65 | Date Compl. Ready to Prod. | Total Depth | P.B.T.D. | |
| Elevations (DF, RKB, RT, GR, etc.) | Name of Producing Formation | 7590 Top Oil/Gas Pay | 7532 Tubing Depth | |
| 6599 GR | Basin Dakota | 7227 | 6724 | |
| 7446 - 73 91 | 7369 - 7227 | | Depth Tasing Since | |
| 1710 - 1321 | | AND CEMENTING RECORD | | |
| HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT | |
| 12-1/4 7-7/8 | 8-5/8 5-1/2 | 470 7590 | 250 sacks 2 stages - 1st stage | |
| | 2-1/16 | 6724 | 150 cubic feet, 2nd | |
| <u> </u> | | | stage fall tubic feet | |
| V. TEST DATA AND REQUEST F OIL WELL | OR ALLOWABLE (Test must be able for this | e after recovery of total volume of load e depth or be for full 24 hours) | d oil and suffice of a trop allow- | |
| Date First New Oil Run To Tanks | Date of Test | Producing Method (Flow, pump, | | |
| Length of Test | Tubing Pressure | Casing Pressure | DEC 2 0 1965 | |
| | | | VOIL CON. COM. | |
| Actual Prod. During Test | Oil-Bble. | Water - Bbls. | Gal. Mc DIST. 3 | |
| GAS WELL Actual Prod. Test-MCF/D | Length of Test | Bbls. Condensate/MMCF | Gravity of Condensate | |
| 5130 MCFPD | 3 hours | 0 | | |
| Testing Method (pitot, back pr.) | Tubing Pressure | Casing Pressure | Choke Size | |
| AOF (back pressure) | | Packer | 3/4 | |
| I. CERTIFICATE OF COMPLIAN | CE | [1] | RVATION COMMISSION | |
| 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. | | APPROVED JAN 2 0 1966 | | |
| | | By Original Signed Emery C. Arnold | | |
| | | TITLE Supervisor Dist. # 4 | | |
| | | | in compliance with RULE 1104. | |
| Hawle Tuebol | | If this is a request for a | allowable for a newly drilled or deepened | |
| Harold C. Nichols (Signature) | | well, this form must be accordent tests taken on the well in a | impanied by a tabulation of the deviation | |

Senior Production Clerk

(Title)
December 14, 1965
(Date)

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.

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