	:	6 i		
DISTRIBUTION	· 4			
SANTA FE		SISERVATION COMMISSION STON	Form C-184 Supersedes Old C-104 and C-110	
F.LE	: KEQUEST I	AND	CLEANSEN ,	
U.S.G.S.	AUTHORIZATION TO TRAN	SPORT OIL AND NATURAL	- GAS QI ILIV	
LAND OFFICE	TRANSPORTER CHANGED FF	ROM SHELL	2,1965	
RANSPORTER . GAS	OIL COMPANY TO SHELL.	PIPE LINE	SEP 0 1965	
GAS CPERATOR	CORPORATION EFFECTIVE	12/31/09		
PRORATION OFFICE			CIL DIST. 3	
TTTP Paristra				
Caulkins Cil	Company			
7.0. Box 780	Farmington, New Mexico			
Reason(s) for filing (Check proper b	ox) Change in Transporter of:	Other (Please explain)	alayand from T 370	
Freezing setters.	Cil Dry Gris		changed from T-179 equested by the C.C.C.	
Then read Switzenbur	Casinghead Gas Condens		iques oed of the event	
If change of ownership give name				
If change of ownership give name and address of previous owner				
. DESCRIPTION OF WELL AN	D LEASE			
Lease No. e	Well No. Pool Num	ne, Including Formation	Kind of Lease Federal	
Breech "A"	679 South	Blanco Tocito	State, Federal or Fee	
Lenation	000 2 12		om The Pact	
Unit Letter J : 1	980 Feet From The South Line	Feet Fro	om The <u>rast</u>	
Line of Section 9	Township 26N Range	<u>Swi , NMPM, sj</u>	o Arriba County	
,				
Name of Futhorized Transporter of	ORTER OF OIL AND NATURAL GAS	S Address (Give address to which ap	proved copy of this form is to be sent)	
She'l Oil Comp		i	mmington, New rexico	
Came of Authorized Transporter of	Casinghead Gas X or Dry Gas	Address (Give address to which ap	proved copy of this form is to be sent)	
El Taso Natura	l Cas Company	0. 3ox 990, Far	rmington, New Lexico	
If well projuces oil or liquids,	Unit Sec. Twp. Rge.	,	When	
give location of tanks.	C	Yes	1954	
	with that from any other lease or pool	give commingling order number:		
V. COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.	
Designate Type of Comple	etion = (X)	! ! · ! · ! · ! · ! · ! · ! · ! · ! · !		
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
5-21-51	Name of Producing Formation	6629 Top Oil/Gas Pay	6629 Tubing Depth	
South Blanco T		6507	6630	
Perforations	00100		Depth Casing Shoe	
			6615	
		DEPTH SET	SACKS CEMENT	
HOLE SIZE	CASING & TUBING SIZE	500	200	
8 3/4	7"	661.5	150	
	2"	6630		
		<u></u>		
	FOR ALLOWABLE (Test must be a able for this de	fter recovery of total volume of load pth or be for full 24 hours)	oil and must be equal to or exceed top allow-	
OIL WELL Date First New Oil Run To Tanks		Producing Method (Flow, pump, go	as lift, etc.)	
<i>2</i> 10 1 10 10 10 10 10 10 10 10 10 10 10 1				
Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
		Water - Bbls.	Gas-MCF	
Actual Prod. During Test	C11-Bbls.			
		<u> </u>		
GAS WELL .				
Actual Frod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
	Tubing Pressure	Casing Pressure	Choke Size	
Testing Method (pitot, back pr.)	I anima Liessana			
I. CERTIFICATE OF COMPLI	ANCE	OIL CONSE	RVATION COMMISSION	
A CLAVIII ICALE OF COMED			1965 , 19, 19	
I hereby certify that the rules a	and regulations of the Oil Conservation			
a thus been compli-	ed with and that the information given the best of my knowledge and belief.	II BY Control of the	and Universe G. Armold	
e e	1	TITLE Super des Dist.	#3	
n		[]		
Haul (This form is to be filed	l in compliance with RULE 1104. allowable for a newly drilled or deepened	
Mauk (Signature)		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-		
Superintendent				
(Title)		able on new and recomplete	able on new and recompleted wells.	
9-3-65	(Data)	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.		
(Date)		Separate Forms C-104	must be filed for each pool in multiply	
		completed wells.		