HO. OF COPIES HECTIVED			
DISTRIBUTION			
SANTA FE			
FILE			
U.S.G.S.		Ĺ	
LAND OFFICE			
IRANSPORTER	OIL		
	GAS		
OPERATOR		II	
PRORATION OFFICE		L	<u> </u>
Operator	Jero	ma	D

	DISTRIBUTION  ANTA FE  REQUEST FOR ALLOWABLE AND  AUTHORIZATION TO TRANSPORT OIL AND NATURAL		Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65							
	LAND OFFICE  IRANSPORTER OIL   GAS    OPERATOR   PRORATION OFFICE	AUTHORIZATION TO TRAIL		API 30-039-XXX 22157						
	Operator  Jerome P. 1	McHugh								
	Address									
	Box 208, Farmington, NM 87401  Reason(s) for filing (Check proper box)  Other (Please explain)									
	New Well	Change in Transporter of:								
	Recompletion Change in Ownership	Oil Dry Gas  Casinghead Gas Condens	. Fil							
	If change of ownership give name and address of previous owner									
11.	DESCRIPTION OF WELL AND I	EASE	regition Kind of Lea	se Lease No.						
	Lease Name Jicarilla	Well No. Fool Name, Including Fo		al or Fee Ind. Cont. #120						
	Location			Fact						
	Unit Letter G : 1850	Feet From The North Line	and 1450 Feet From	The Last						
	Line of Section 30 Tow	mship 26N Range 4	W , NMPM, Ri	o Arriba County						
	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA	S							
111.	Name of Authorized Transporter of Oll	of Condensate A	134.000 (0.000 ============================							
	Plateau, Inc.  4775 Indian School Road NF. Alb. NM 871  Name of Authorized Transporter of Casinghead Gas or Dry Gas X  Address (Give address to which approved copy of this form is to be s									
		Pipeline Corp.	Box 90, Farmington Is gas actually connected?	, NM 87401						
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. P.ge.	NO .							
		h that from any other lease or pool,	give commingling order number:							
IV.	COMPLETION DATA	Oil Well Gas Well		Plug Back   Same Res'v. Diff. Res'v.						
	Designate Type of Completion	Date Compl. Ready to Prod.	X )	P.B.T.D.						
	Date Spudded 10-30-79	11-28-79	7780'	7730'						
	Elevations (DF, RKB, RT, GR, etc.) 6715 GL	Name of Producing Formation Basin Dakota	Top Oil/Gas Pay 7570 '	Tubing Depth 7625'						
	Desferations			Depth Casing Shoe						
	7460-7468, 7570-7676,	7579-7585, 7606-7612, 76	16-/622, /655-/661 CEMENTING RECORD							
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT						
	12-1/4"	8-5/8"	235' 7785' RKB	185 sx 350 sx 1sf stage						
	7-7/8"	4-1/2"		250 sx 2nd stage						
		1-1/2"	7625 RKB	425 sx 3rd stage						
V.	TEST DATA AND REQUEST FOOL WELL	able for this de	(Element and life etc.)							
OII. WELL 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-Bbis.	Water - Bbls.	Gas · MCF						
	Actual Prod. During 1421									
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate						
	1036 Testing Method (piros, back pr.)	3 hrs Tubing Pressure (shut-in)	Casing Pressure (Shut-in)	Choke Size						
	Back Pressure	1920 SI	2160 SI	3/4"						
VI.	CERTIFICATE OF COMPLIAN	CE	OIL CONSERV	ATION COMMISSION						
	I hereby certify that the rules and	regulations of the Oil Conservation	APPROVED	, 19						
Commission have been complied with and that the intermediate			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							
							The During Island	atwe)	well, this form must be accom	cordance with RULE 111.
						Agent (Title)			tests taken on the well in accordance with notice that sections of this form must be filled out completely for allow-	
able on new and recompleted	TT TTT and UT for changes of owner,									
	12-14-79	1	well name or number, or transp	orter, or other such change of condition.						