NO. OF COPIES REC	511155		77		(A) (4)
DISTRIBUTI	_ ·	<del></del>	<b>/</b>		E 0.101
		1	1	NEW MEXICO OIL CONSERVATION COMMISSION	Form C-104 Supersedes Old C-104 and C-110
SANTA FE /			REQUEST FOR ALLOWABLE  AND	Effective 1-1-65	
		-	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS		
U.S.G.S.		<del> </del>		AUTHURIZATION TO TRANSPORT OIL AND NATURAL GAS	
TRANSPORTER -	OIL	/	† †		
	GAS	:/-	<del> </del>		
OPERATOR		3			
PRORATION OF	FICE	<u> </u>			
Operator					
MORT	HVEST	72	COUC	TION CORPORATION	
Address					
POST	OFFI	CE :	DOX	1796, EL PASO, TEXAS 79949	
Reason(s) for filing				Other (Please explain)	
New Well	X			Change in Transporter of:	
Recompletion				Oil Dry Gas	
Change in Ownersh	L			Casinghead Gas   Condensate	

( rungstur			
Operator	PROPERTY CONTINUES A TIME		
Address	UCTION CORPORATION		
	- 1706 PT DAGA SEVAS 7	9949	
Reason(s) for filing (Check proper bo	K 1796, KL PASO, TEXAS 7	Other (Please explain)	
· =	Change in Transporter of:		
	· · · · · · · · · · · · · · · · · · ·	Sas [	
Recom; letion		<u> </u>	
Change in Ownership	Casinghead Gas Cond	ensate	
If change of ownership give name			
and address of previous owner			
I. DESCRIPTION OF WELL AND	LEASE	Jame, Including Formation	Kind of Lease Jicarilla
Lease Name			State, Federal or Fee <b>Federal</b>
JICARILLA CONTRACT N	0. 152 W 7 2-7	BASIN BAEDTA	State, 1 edetal of 1 cc
Location	•		
Unit Letter D ; 105	O Feet From The	ine and <b>790</b> Feet Fra	m The West
			d a Amed ba
Line of Section 7 , T	ownship 26 North Range	5 West , NMPM,	ie Arriba County
I. DESIGNATION OF TRANSPO	RTER OF OIL AND NATURAL G	AS	
Name of Authorized Transporter of C	or Condensate	Address (Give address to which ap	proved copy of this form is to be sent)
New Mexico Tankers		Farmington, New Mo	
Name of Authorized Transporter of C	Casinghead Gas cr Dry Gas		proved copy of this form is to be sent)
El Paso Natural Gas C		Bez 990, Farmingte	m, Nov Mexico
	Unit Sec. Twp. Rge.	Is gas actually connected?	When
If well produces oil or liquids,	D 7 26K 5W	Xe	
give location of tanks.			
If this production is commingled	with that from any other lease or poo	l, give commingling order number:	
V. COMPLETION DATA	Cil Well Gas Well	New Well Workover Deeper.	Plug Back   Same Res'v. Diff. Res'v
Designate Type of Comple		1	
	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Date Spudded		7661'	7643'
February 20, 1965	April 9, 1965	Top Oil/Gas Pay	Tubing Depth
Fool	Name of Producing Formation		
Basin Baketa	Bakota	7368'	Depth Casing Shoe
Perforations 7642-7633; 762	0-7506; 7569-7564; 7526-	-7817; 743x-74X7;	
7402-7390			7677'
	TUBING, CASING, A	ND CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-1/4"	8-5/8"	464'	300
7-7/8"	5-1/2"	7677 '	800
	1-1/4"	6900'	
	2-3/8" slim hel	6900±7385	
W COURT DATE AND DECLIEST			oil and must be equal to or exceed top allow
V. TEST DATA AND REQUEST		depth or be for full 24 hours)	we to
OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, ga	s lift, etc.)
Poste I list item off from 10 fames	İ		/QTI.IIV[D \
Lough of Toot	Tubing Pressure	Casing Pressure	Charle S 2
Length of Test			1000 0 1065
A L D L D L D L D L D L D L D L D L D L	Oil-Bbls.	Water-Bbls.	Gas-MCHAPR 3 Q 1965
Actual Prod. During Test	011-10010		OIL CON. COM.
			DIST. 3

GAS WELL Bbls. Condensate/MMCF Gravity of Con-Length of Test Actual Frod. Test-MCF/D 2864 3 hr Choke Size
3/4" Therahill-Craver Casing Pressure Tubing Pressure Testing Method (pitot, back pr.) 237 PSIA Neme Back Pressure

## 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.

J. M. Newman. (Signature)
(Signature)  J. M. Nowman, McFitte, Prod. Oper.
April 37, 1965 (Date)

OIL CONSERVATION COMMISSION

APPROVED MAY 7 1965 Original Signed Emery C. Arnold

## TITL Supervisor 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 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 multiply completed wells.

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## NORTHWEST PRODUCTION CORPORATION POST OFFICE BOX 1796 EL PASO, TEXAS 79949

DEVIATION TESTS
WELL "W" 2-7
HW 7-26H-5W
Rio Arriba County, N. M.

1/4° at	470'
1/2	900
1	1480
1-1/4	1880
2-1/2	2127
2-3/4	2650
3-1/4	3373
1-3/4	3810
2	4310
1	4589
1/4	5249
3/4	5550
1-1/4	5840
1/2	6369
3/4	6870
1/2	7296
1/2	7675

## MORTINESST REGIOUTION CORPORATION

POST OFFICE FOL 1150 EL PRES, STEAR 20049

> DZVIATION TERES WRLL, "W' 2-7 NW 7-26M-5W RIO Arriba County, W. M.

	470	$1/4^{\circ}$ at
	900	1/2
	1480	
	1380	1-1/4
	2337	2-1/2
	2850	3/8-3
	2373	3-1/4
	3310	1-3/4
's <b>a</b>	4310	3
, ed.	5 P.C 2	1
	5249	1/1
	5550	150
	5840	1-1/4
	୧୫୦ଟ	1/2
	3870	3/4
	7296	1/2
	3000	1/3