ſ	NO. OF COPIES RECE	5				
Ī	DISTRIBUTION					
- 1	SANTA FE					
1	FILE U.S.G.S.					
Ì	LAND OFFICE					
	TRANSPORTER	OIL				
	INANSPORTER	G A S				
	OPERATOR					
1	PRORATION OFFICE		L.			
	Operator					

	NO. OF COPIES RECEIVED DISTRIBUTION SANTA FE FILE U.S.G.S. LAND OFFICE I RANSPORTER GAS OPERATOR	REQUEST FO	NSERVATION COMMISSION OR ALLOWABLE AND SPORT OIL AND NATURAL GAS	Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65		
1.	PRORATION OFFICE					
	Operator Paul Slayton					
	Address		00001			
	115 E. Country C	lub, Roswell, N. Mex	Other (Please explain)			
	Reason(s) for filing (Check proper box) New We!1	Change in Transporter of:				
	Recompletion	Oil Dry Gas				
	Change in Ownership	Casinghead Gas Condens	ate			
'	If change of ownership give name and address of previous owner	. Sam G. Dunn Oil Opera	tions, P. O. Box 3095, Lub	obock, Texas		
II.	DESCRIPTION OF WELL AND L	EASE Well No. Pool Name, Including For	rmation Kind of Lease	Federal Lease No.		
	Lease Name Jicarille	7 11 - 10 - 10	State, Federal or F	e Indian		
	Boulder Contract #241	b Boulder Mancos				
	Unit Letter K : 1980	Feet From The South Line	and 1650 Feet From The	West		
	Olik Bettst	B	NIMPM A A	County		
	Line of Section 23 Town	nship 28N Range	1W , NMFM, Rio Arri			
111.	DESIGNATION OF TRANSPORT	ER OF OIL AND NATURAL GAS	Address (Give address to which approved c	copy of this form is to be sent)		
	Name of Authorized Transporter of Oil	or Condensate	705 Municipal Dr., Farmi			
	Shell Oil Company Name of Authorized Transporter of Cast	inghead Gas or Dry Gas	Address (Give address to which approved of	copy of this form is to be sent)		
	Name of Authorized Handports					
	If well produces oil or liquids,	Unit Sec. Twp. P.ge.	Is gas actually connected? When			
	give location of tanks.	N 14 28N 1W	No			
	If this production is commingled with			Det Det Basiy		
IV	COMPLETION DATA		New Well Workover Deepen Pl	ug Back Same Res'v. Diff. Res'v.		
	Designate Type of Completio	n – (A)	Total Depth P	.B.T.D.		
	Date Spudded	Date Compl. Ready to Prod.				
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay T	ubing Depth		
				epth Casing Shoe		
	Perforations					
	TUBING, CASING, AND CEMENTING RECORD					
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
				la constant de la constant		
v	TEST DATA AND REQUEST FOR ALLOWABLE (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)					
·	OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift,	stc.)		
	Date First New Cir Nam 10 1			Choke Size		
	Length of Test	Tubing Pressure	Casing Pressure			
	Actual Prod. During Test	Oil-Bbis.	Water - Bbls.	Gas-MCF 2 1971		
	Notice Lines parally 1					
				JON. COM.		
	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Conde Gt. 3		
	Weiling Stone 1891-MOLYD		Casing Pressure (Shut-in)	Choke Size		
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Since-14)			
			OIL CONSERVAT	ION COMMISSION		
V	. CERTIFICATE OF COMPLIANCE			FEB 1 2 19/1		
	I hereby certify that the rules and	regulations of the Oil Conservation	APPROVEDOriginal Signed by E	mery C. Arnold		
	Commission have been complied	with and that the information given he best of my knowledge and belief.	BY Original Signed by L	CHORDAIGOD DICO. 20%		
	WOOAS IN TIME WING COMPASSED TO THE		TITLE	SUPERVISOR DIST. #5		
	Day 1 Slaute		- to to be filed in co	mpliance with RULE 1104.		
			If this is a request for allowable for a newly drilled or deepened			
	(Sig	(Signgture)				
		Cida	All sections of this form must	be filled out completely for allowed		
	(7	(itle)		III, and VI for changes of owner, is or other such change of condition.		
	(1	Date)	II or number, or transporte	be filed for each pool in multiply		
			completed wells.			

Saul Slivet
(Title)
(Date)