ſ	NO. OF COPIES RECEIVED 5												
ŀ	DISTRIBUTION	1	NEW MEY ICO OU CO										
ł	SANTA FE /	\vdash		ONSERVATION COMMISSION	Form C-104 Supersedes Old C-104 and C-110								
ł	FILE /		KEQUEST F	FOR ALLOWABLE AND	Effective 1-1-65								
	U.S.G.S.		AUTHORIZATION TO TRAN	NSPORT OIL AND NATURAL GA	ve.								
	LAND OFFICE		AUTHORIZATION TO TRAF	ASPORT OIL AND NATURAL GA	45								
	OIL /												
	TRANSPORTER GAS												
	OPERATOR 2												
1.	PRORATION OFFICE												
•	Operator												
	Paul Slayton												
	Address												
	115 E. Country Club, Roswell, N. Mex 88201												
	leason(s) for filing (Check proper box) Other (Please explain)												
	New We!i Change in Transporter of:												
	Recompletion Oil Dry Gas												
	Change in Ownership		Casinghead Gas Condens	sate									
	If change of ownership give nam												
	and address of previous owner		. Sam G. Dunn 011 Operat	ions, P. O. Box 3095, L	ubbock, Texas								
II.	DESCRIPTION OF WELL A	ND I	LEASE	rmation Kind of Lease	Lease No.								
	Lease Name (Jicarilla	a) Well No. Pool Name, Including For	State, Federal	Federal								
	Boulder (Contract	#24	1) 7 Boulder Mancos	State, redetar	(Indian)								
	Location	18	80										
	Unit Letter C : 1980. Feet From The North Line and 2310 Feet From The Rast												
	Line of Section 14	Tow	mship 28N Range	1W , NMPM, Rio Ar	riba County								
	DESIGNATION OF TRANSP	ים מ	TER OF OIL AND NATURAL GAS	s									
111.	Name of Authorized Transporter o			Address (Give address to which approve	ed copy of this form is to be sent)								
	Shell Oil Cor		A	705 Mumicinal Dr. Re	rmington, N. M.								
	Name of Authorized Transporter o	f Cas	inghead Gas or Dry Gas	705 Municipal Dr., Farmington, N. M. Address (Give address to which approved copy of this form is to be sent)									
	Name of Additionated Transporter of Cashington												
			Unit Sec. Twp. P.ge.	Is gas actually connected? When	n								
	If well produces oil or liquids, give location of tanks.		N 14 28N 1W	No									
		If this production is commingled with that from any other lease or pool, give commingling order number:											
JV.	COMPLETION DATA		Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.								
	Designate Type of Comp	letio	n = (X)										
	Date Spudded		Date Compl. Ready to Prod.	Total Depth	P.B.T.D.								
	Elevations (DF, RKB, RT, GR, et	tc. j	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth								
	Perforations				Depth Casing Shoe								
		CEMENTING RECORD											
	HOLE SIZE		CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT								
			,										
				<u> </u>	<u> </u>								
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 (or this depth or be for full 24 hours)												
	OIL WELL		able for this dep	Producing Method (Flow, pump, gas life	etc.)								
	Date First New Oil Run To Tanks	5	Date of Test	producing Method (1 tow, pamp, gas 1)	/ Malayell								
			The base of the same of the sa	Casing Pressure	Choke Size								
	Length of Test		Tubing Pressure	Cdsing Pressure	FEB 12 1971								
				Water - Bbls.	Gast MCF								
	Actual Prod. During Test		Oil-Bbls.	#4/41 - DDIS+	OIL CON. COM.								
				L	DIST. 3								
					0131.3								
	GAS WELL		I was at many	Bbis. Condensate/MMCF	Gravity of Condensate								
	Actual Prod. Test-MCF/D		Length of Test	PRIS. COMPANY AND LANGE	Gravity of Condensate								
			Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size								
	Testing Method (pitot, back pr.)		t doing trassma (Sunctin)										

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.

above is true and complete to the best of my anomales
Sail Mays
(Signature)
(Title)
(Date)

OIL CONSERVATION COMMISSION

APPROVED					FEB 1,2	1971	
By Original		by	Emery	C.	Arnold		
TITLE	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 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.