			<u> </u>						
ſ	NO. OF COPIES RECE		3						
1	DISTRIBUTIO	N							
Ì	SANTA FE		/						
Ì	FILE	1	7						
	U.S.G.S.								
	LAND OFFICE								
	TRANSPORTER	OIL							
	IRANSPORTER	GAS							
	OPERATOR	2							
1.	PRORATION OF								
	Operator WILLIAM								
	Address								

	DISTRIBUTION SANTA FE	/		NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE			Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65				
j	FILE										
	U.S.G.S.			AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS							
	LAND OFFICE	++									
	TRANSPORTER GAS	7									
	OPERATOR	2	=								
	PRORATION OFFICE										
4.	Operator					-					
	WILLIAM C. RUSSELL										
	Address	1 10010									
		1775 Broadway, New York, N. Y. 10019 Other (Please explain)									
	Reason(s) for titing (cineer proper con)										
	New Well XX			Change in Transporter of: Oil Dry Gas	change of lease operator-						
Recompletion							company, inc.				
	Change in Ownership			Custingneut Gus contains	TOTMET	rease ope	racor				
	If change of ownership give	e nam	ie								
	and address of previous ow	vner _									
77	DESCRIPTION OF WEL	T. AN	ו מע	EASE							
11.	Lease Name	110 111	<u>,, D .</u>	Well No. Pool Name, Including For		ind of Lease	Lease No.				
	Hammon	nd		52 Largo Chac	ra s	tate, Federal or F	**Federal NM03603A				
	Location										
	Unit Letter G	,_1	L80	O Feet From The North Line	and 1650	Feet From The_	East				
	Line of Section 26		Tow	mship 27 N Range 8	W , NMPM,	San Juar	County				
				CAS	a						
III.	DESIGNATION OF TRA	NSP	ORT	or Condensate	Address (Give address to	which approved c	opy of this form is to be sent)				
	Name of Authorized Transpo	rter o			(• •					
	Name of Authorized Transpo	orter of	f Cas	inghead Gas or Dry Gas	Address (Give address to which approved copy of this form is to be sent)						
				al Gas Company	P.O. Box 149						
			<u>u</u> L	Unit Sec. Twp. Rge.	Is gas actually connected		,				
	If well produces oil or liquid give location of tanks.	is,			No	t .	_				
				h that from any other lease or pool, g	give commingling order r	umber:	** -				
IV	COMPLETION DATA	ingied	ı wı	in that from any other rease or poor, a							
17.			Oil Well Gas Well	New Well Workover	Deepen Pl	ag Back Same Res'v. Diff. Res'v.					
	Designate Type of C	ompi	letio	.1	XX	1	B.T.D.				
	Date Spudded		-	Date Compl. Ready to Prod.	Total Depth	١٠.	ŀ				
	6-4-73			11-5-73	4720 Top Oil/Gas Pay		3088 bing Depth				
	Elevations (DF, RKB, RT, C	GR, et	c. j	Name of Producing Formation	3078		3080				
	6006 GR			Chacra	3078	De	pth Casing Shoe				
	Perforations	30	278	3-3088			4710				
				TUBING, CASING, AND	CEMENTING RECORD						
	101 E 617 E			CASING & TUBING SIZE	DEPTH SE		SACKS CEMENT				
	12 3/4			10 3/4	210		200				
	8 3/4			7	2365		800				
	$\frac{3}{6}\frac{3/4}{1/4}$			4 1/2	4710		750				
	tubing		1 1/4	3080							
v	TEST DATA AND REQ	UES	TF	OR ALLOWABLE (Test must be af	fter recovery of total volum	e of load oil and	must be equal to or exceed top allow-				
٧.	OIL WELL			4010 707 1110 00	pth or be for full 24 hours	110					
	Date First New Oil Run To	Date First New Oil Run To Tanks Date of Test				1. 1					
					Casing Press		Choke Size				
	Length of Test			Tubing Pressure	1 7 7 7						
				Oil-Bbls.	Water-Bis. JAN 1	0 1974 G	as - MCF				
	Actual Prod. During Test			OII-BBIB.	Tan Jan	. com.					
					1 OIL CO	N. CO.					
	Actual Prod. During Test OIL CON. COM. DIST. 3										
	GAS WELL Actual Prod. Test-MCF/D			Length of Test	Bbls. Condensate/MMCr		ravity of Condensate				
	1,394			3 hrs.							
	Testing Method (pitot, back	k pr.)		Tubing Pressure (Shut-in)	Casing Pressure (Shut-	in) C	hoke Size				
	back pr			1125	1137		3/4"				
.	CERTIFICATE OF COMPLIANCE				OIL C	ONSERVATI	ON COMMISSION				
Y1	. CERTIFICATE OF CO).NE L	IMI	CE	100 04/4						
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given					APPROVED						
					By Original Signed by Emery C. Arnold						
	above is true and compl	lete t	o th	e best of my knowledge and belief.	TITLE						
Melliair C. Cerrell Operator					TITLE	تتب بدير و ديم يايا ان	<u></u>				
					This form is to	This form is to be filed in compliance with RULE 1104.					
						and the second 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-						
			(T	itle)	able on new and rec	able on new and recompleted wells.					
		1-1	-7	4 <u></u>	Fill out only Sections I. H. III, and V' for changes of owner,						