NO. OF COPIES RECEIVED 5					
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SANTA FE					
FILE			•		
U.S.G.S.					
LAND OFFICE	i				
TRANSPORTER	OIL	1			
	GAS	1			
OPERATOR		1			

	DISTRIBUTION SANTA FE /		NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE AND				Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65	
	U.S.G.S. LAND OFFICE IRANSPORTER OIL / GAS /	AUTHORIZATION	TO TRA		ND NATURAL (GAS		
	OPERATOR /							
1.	Cperator	many Incomensies				· · · · · · · · · · · · · · · · · · ·		
	Address	ompany Incorporated				 		
	2700 Humble By Reason(s) for filing (Check proper box	ailding, Houston, To	exas	77002	lease explain)			
	New Well Recompletion Change in Ownership	Change in Transporter of Cil Casinghead Gas	f: Dry Ga Conder	s La Pla Oil G	eta Gatherin Depany Incom 1, 1966.	ig System,	erator from Inc. to Austral factive	
	If change of ownership give name and address of previous owner					*·· · · · · · · · · · · · · · · · · · ·		
II.	DESCRIPTION OF WELL AND	LEASE						
	Lease Natie Navajo Location	Well No.		ne, Including Format in Dakota	ion	Kind of Lease State, Federal	or Fee Indian	
		Feet From The Nor	th Lin	e and <u>1650</u>	Feet From '	The East		
	Line of Section 25 , To	ownship 27N R	.ange 9	. W , N	MPM, San	Juan	County	
	*- Formerly Well #2-	25						
111.	Name of Futhorized Transporter of Of	or Condensate		Address (Give addr		1		
	Name of Authorized Transporter of Ca	Pransecatern Jane	lecis/	P.O. Box 20				
	El Paso Natural Gas		**-	P.O. Box 900	O, Parmingto		tico	
	If well preduces oil or liquids, give location of tanks.	Unit Sec. Twp.	Rge.	Is gas actually con	nected? Wh	en 3-26-65		
	If this production is commingled w				order number:	SW-246		
IV.	COMPLETION DATA		as Well	New Well Worko	ver Deepen	Plug Back S	ame Res'v. Diff. Res'v.	
	Designate Type of Completi							
	Date Spud led	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.		
	Poo!	Name of Producing Formation	n	Top Oil/Gas Pay		Tubing Depth		
	Perforations			<u> </u>		Depth Casing	Shoe	
	HOLE SIZE	CASING & TUBING S		DEPT	H SET	SAC	KS CEMENT	
						<u> </u>		
V.	TEST DATA AND REQUEST FOIL WELL	OR ALLOWABLE (Test able)		pth or be for full 24 i	hours)		ul to or exceed top allow-	
	Date First New Oil Run To Tanks	Date of Test		Producing Method (Flow, pump, gas li	ft, etc.)	FIVED/	
	Length of Test	Tubing Pressure		Casing Pressure		Choke Sta		
	Actual Prod. During Test	Oil-Bbls.		Water-Bbls.		Gas MCF	N3 0 1966	
						L OIL	CON. CO	
P	Condensate transported GAS WELL	by Transwestern Ta	nkers	- sold to Sh	ell Cil Com	veny /	DIST. 3	
	Actual Prod. Test-MCF/D	Length of Test		Bbls. Condensate/	MMCF	Gravity of Cor	densate	
	Testing Method (pitot, back pr.)	Tubing Pressure		Casing Pressure		Choke Size		
								
VI.	I. CERTIFICATE OF COMPLIANCE			OIL CONSERVATION COMMISSION				
	I hereby certify that the rules and			APPROVED	JUN 3	0 1966	, 19	
	Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief. Roy Copeland (Signature)			BY_Origi	nal Signed I	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.				
	Drilling 4 Production	•	<u> </u>	All section	s of this form mu	st be filled out	completely for allow-	
	June 27, 1	itle) 966		able on new an	d recompleted w	ells.	for changes of owner,	
		Date)		well name or nu	imber, or transpor	ter, or other suc	h change of condition.	

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.