				:		
NO. OF COPIES RECEIVED				İ		
DISTRIBUTION	NEW MEXICO OIL	. CONSERVATION COM	MISSION	Form C-104		
SANTA FE		T FOR ALLOWABLE		Supersedes Old		
FILE / _	+	AND		Effective 1-1-65	i	
U.S.G.S.	AUTHORIZATION TO T	RANSPORT OIL AND	NATURAL GA	\S		
LAND OFFICE	_					
TRANSPORTER GAS /	-					
OPERATOR 2	-					
Operator Western Oil and	d Minerals Corp.					
Address P. O. Box 191,	Farmington, New Me	xico	· -· · · · · · · · · · · · · · · · · ·			
Reason(s) for filing (Check proper box	,	Other (Pleas	e explain)			
New Well	Change in Transporter of:		•			
Recompletion	Oil Dry	Gas 🔲				
Change in Ownership	Casinghead Gas Con	densate				
If change of ownership give name and address of previous owner						
DESCRIPTION OF WELL AND	LEASE					
Lease Name Marron	Well No. Pool Name, Including 2 So. Blanc	Formation PC	Kind of Lease	Federal	Lease No.	
	2 50, Diano		State, Federal o	or Fee	03605	
Location H 19	53 North	546		East		
Unit Letter;;		_ine and	Feet From Th	e		
Line of Section Toy	27 N wnship Range	8W , NMP	san J	uan	County	
Ente of Section 100	Transgo Transgo	,				
Name of Authorized Transporter of Oil Name of Authorized Transporter of Car	singhead Gas or Dry Gas			d copy of this form is to		
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge.	Is gas actually connec	ted? When			
If this production is commingled with COMPLETION DATA	th that from any other lease or poo	l, give commingling orde	er number:			
Designate Type of Completic	on - (X) Oil Well Gas Well X	New Well Workover	Deepen	Plug Back Same Res	v. Diff. Restv.	
10-3-69	Date Compl. Ready to Prod.	Total Depth 2280		P.B.T.D.		
So. Blanco PC	Name of Producing Formation Pictured Cliffs	Top Oll Cas Pay	Pop OU/Gas Pay 2205		Tubing Depth 2250	
Perforations Slotted line	r - 2200-2250			Depth Casing Shoe 2184		
	TUBING, CASING, A	ND CEMENTING RECO	RD			
open hole SIZE	slotted 42 liner	2230 DEPTH 5	ET	SACKS CEME NONE	ENT	
	<u> </u>		9			
SUF 2205-5	0 W/ 35-000 (12/Water,	30,000	Z 5 d		
TEST DATA AND REQUEST FOOL WELL		after recovery of total vol depth or be for full 24 how		d must be equal to or an	seed top allow	
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flo		etc.)	TYED	
Length of Test	Tubing Pressure	Casing Pressure		Choke Size CCT 1 6 1969		
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.		Gas-MCF		
	<u></u>			OIL CO!	N. COM. / T. 3	
GAS WELL						
	Length of Test to be submitted	Bbls. Condensate/MMC	F	Gravity of Condensate		

Tubing Pressure (Shut-in)

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.

Testing Method (pitot, back pr.)

VI. CERTIFICATE OF COMPLIANCE

Casing Pressure (Shut-in) Choke Size

OIL CONSERVATION COMMISSION Original Signed by Emery C. Arnold APPROVED_ SUPERVISOR DIST. #3

TITLE 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.