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DISTRIBUTION	-	NEV	MEXICO OIL	CONSERVA
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U.S.G.S.		AUTHORIZA	TION TO T	
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doress		n nahaa	Dan	Colomas
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Reason(s) for filing (Check p	roper box)	Change in Tran	sporter of:	
lew Well		Oil		y Gas
tecompletion		Casinghead Ga		ndensate
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Hancock Location Unit Letter C	. 990	SF 079116	North	Line and
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October 28, 1965

(Date)

ATION COMMISSION LOWABLE

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

FILE		1	-		AND	Encetive 1-1-03
u.s.g. s .		ļļ		AUTHORIZATION TO TRAN	ISPORT OIL AND NATURAL G	AS
LAND OFFICE	1	ļi				
RANSPORTER	OIL_					
	GAS	+I				
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	natio	nal	Oi:	l & Gas Corporation		
Literia	Id C 10			L & Cus Corporation		
	etrol	eum	Cli	ub Building, Denver, Co	olorado 80202	
eason(s) for filing					Other (Please explain)	
ew Well				Change in Transporter of:		
ecompletion				Oil Dry Gas	NMOCC Memo 2-65	5
hange in Ownersh	lp			Casinghead Gas Condens	sate	
change of owner d address of pre						
ESCRIPTION C	OF WEI	L A	ND L	LEASE NO LINGUING Decl No.	e, Including Formation	Kind of Lease
ease Name	_			. –	Kutz Pictured Cliffs	State, Federal or Fee Federal
Hanco	ck			SF 079116 12 West :	Rutz Fictured Cillis	10003
ocation	_		000	Feet From The North Line	. 1650	The West
Unit Letter	<u> </u>	- <i>i</i>	<u>990</u>	Feet From The NOTCH Line	e and Feet From	The
1 1 6	10		Tow	vaship 27N Range 1	2W , NMPM, Sai	n Juan County
Line of Section	10_		10%	namp Z/N range 1	211	
CCIONATION (OF TR	NSP	овт	TER OF OIL AND NATURAL GAS	S	
ame of Authorized	Transpo	orter o	f Oil	or Condensate	Address (Give address to which appro-	ved copy of this form is to be sent)
ame of Authorized	Transp	orter o	f Cas	singhead Gas or Dry Gas 🔀	Adria Gire address to which appro-	ved copy of this form is to be sent)
			_	Sas Company	1507 Pacific Avenue	, Dallas, Texas
			11 0	Unit Sec. Twp. Rge.	Is gas actually connected? Wh	en
well produces of ive location of ta		as,			yes	11-3-52
				th that from any other lease or pool,	give commingling order number:	
this production OMPLETION		ingie	a wit	in that from any other lease of poor,		
				Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'
Designate Ty	ype of (Jomp	letio	n - (X)	1 1 1	1 1
ate Spudded				Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
12-14	-52			12-31-52	1525 *	1525
levations (DF, R		GR, e	tc.,	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
5860	Gr			Pictured Cliffs	1445	1523 [†] Depth Casing Shoe
Perforations						
Open	hole	_14	47-	-1525 *		1447
				TUBING, CASING, AND	CEMENTING RECORD	SACKS CEMENT
HOL	E SIZE			CASING & TUBING SIZE	DEPTH SET	_
13-3/	411			10-3/4"	87	100
8-3/4	<u> </u>			711	1447*	1
					15231	
				1 7"		and must be equal to or exceed top all
	ND REC	QUES	TF	OR ALLOWABLE (Test must be a) able for this de	fter recovery of total volume of load oil oth or be for full 24 hours)	and must be equal to by exceed top at-
OIL WELL Date First New OF	l Bus To	Tonk		Date of Test	Producing Method (Flow, pump, gas l	ift, etc.)
Date First New Or			-			CLEIN
ength of Test				Tubing Pressure	Casing Pressure	Chok
						1 3 5 6 4 4 1
Actual Prod. Duris	ng Test	,		Oil-Bbls.	Water-Bbls.	NOV 1 1965
						OIL CON. COM.
GAS WELL					1 = 2	Gravity of Condensate
Actual Prod. Tes	-MCF/E)		Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
1020				3 hr. Tubing Pressure		Ob also Cina
Testing Method (F	itot, bac	k pr.)		Tubing Pressure	Casing Pressure	Choke Size
В. Р.				no record	no record	
ERTIFICATE	OF CO	MPI	IAN	CE		ATION COMMISSION
					IN U V	1 1965
hereby certify	that the	rules	and	regulations of the Oil Conservation	APPROVED	, 19
						mery C. Arnold
bove is true ar	id comp	iete (o the	e best of my knowledge and belief.	Supervis	sor Uist. # 3
					TITLE	η Θ
			7	_	This form is to be filed in	compliance with RULE 1104.
Www.	7	>	<.l) we as a s		with for a newly drilled or deeper
/1-		<u> </u>	Sien	nature)	well, this form must be accomp tests taken on the well in acc	venied by a tabulation of the deviat
7.7m 7	2 90	hue		District Engineer	tests taken on the well in acc	ordance with AUCE (1).
WHI.	30		(T	itle)	All sections of this form make able on new and recompleted w	wells.
			٠,٠,٠	=		

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.