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	DISTRIBUTION SANTA FE FILE / U.S.G.S. LAND OFFICE I RANSPORTER OIL GAS / OPERATOR /	REQUEST	CONSERVATION COMMISSION FOR ALLOWABLE AND ANSPORT OIL AND NATURAL	Form C-104 Supersedes Old C-104 and C-116 Effective 1-1-65 GAS			
l.	Operator	<u> </u>					
Address 501 Airport Drive, Farmington, New Mexico 87401 Reason(s) for filing (Check proper box) Other (Please explain)							
	Recompletion Change in Ownership	Oil Dry Ga Casinghead Gas Conder	₹ 1				
	Eff. 2-1-71,						
	If change of ownership give name and address of previous owner						
II.	DESCRIPTION OF WELL AND LEASE AMOCO PROD. CO.						
R. P. Hargrave "D" 1 Fulcher Kutz Pictured Cliffs State, Federal or Fee							
R. P. Hargrave "D" 1 Fulcher Kutz Pictured Cliffs State, Federal or Fee Federal S.							
	Unit Letter K ; 16	Feet From The South Lin	ne and 1650 Feet From	The West			
	Line of Section 9 Tov	wnship 27-N Range	10-W , NMPM,	San Juan County			
III.	DESIGNATION OF TRANSPORT	rer of oil and natural ga	Address (Give address to which appro	oved copy of this form is to be sent)			
	Name of Authorized Transporter of Casinghead Gas or Dry Gas X Southern Union Gathering Company		Address (Give address to which appropriately, 18				
	If well produces oil or liquids,	Unit Sec. Twp. Rge.		nen			
	give location of tanks.		Yes	August 2, 1970			
If this production is commingled with that from any other lease or pool, give commingling order number:							
3 ♥ .	Designate Type of Completic	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.			
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.			
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Cil/Gas Pay	Tubing Depth			
	Perforations		4	Depth Casing Shoe			
			A CENTRAL DECARD				
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT			
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 for this depth or be for full 24 hours)							
	Date First New Cil Run To Tanks Date of Test Producing Method (Flow, pump, gas lift, etc.)						
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size			
	Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF			
		<u></u>	J				
1	GAS WELL	It analy of Tract	Bbls. Condensate/MMCF	Gravity of Condensate (V)			
	Actual Prod. Test-MCF/D	Length of Test	BDIs. Condensate/MMCF	Gravity of Condensate 141.			
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size			
	GERMINICAME OF COMPLIAN	VERTIFICATE OF COMPLIANCE		ATION COMMISSION			
VI. CERTIFICATE OF COMPLIANC		J E	11				
	I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given		APPROVED AUG 28 1970 By Original Signed by A. R. Kendrick 19				
	above is true and complete to the	best of my knowledge and belief.					
	(Signature) Administrative Assistant (Title) August 27, 1970 (Date)		TITLE PETROLEUM ENGINEER DIST. NO. 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 allow-				
			able 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.				