NO. OF COPIES REC	1		
DISTRIBUTIO		7	
SANTA FE	1		
FILE .	1	~	
U.S.G.\$.			
LAND OFFICE			
TRANSPORTER	OIL	1	
INANSPORTER	GAS		
OPERATOR	4		

NEW MEXICO OIL CONSERVATION COMMISSION

SANTA FE		1		-		REQUEST	FOR AL	LOWABLE		Supersedes Old C-104 and C-110 Effective 1-1-65			
FILE .	AUTHORIZATION TO TRA						AND						
LAND OFFICE				AUTHO	KIZATI	ON TO TRA	ANSFUR	I UIL AND	NATURAL	GAS			
RANSPORTER	OIL GAS	1											
OPERATOR		4											
PRORATION OF	FICE	<u> </u>											
Operator		SOL	JTHL	AND ROYAL	TY COM	PANY							
Address				_									
P. O. Draw				-	New Me	xico 874	101	101 (0)					
Reason(s) for filing New Well	(Check ;	propei	box		Transpor	ter of:		Other (Pleas	e explain)				
Recompletion	Ħ			Oil		Dry Go	15		NA	ME CHAN	IGE ·		
Change in Ownership Casinghead Gas Condensate													
If change	giv	e nar	ne A	ztec Oil	E Gas	Company	PΩ	Drawer 5	70 Farm	ington	New Mexico	87401	
and address of prev	vious ov	vner .			q 023	company,	1. 0.	Diawei 3	70, 1411	IIIg coir,	, NOW HEXTER	5/401	
DESCRIPTION O	F WEL	L A	ND I	LEASE									
Lease Name				Well No.	Pool Nam	e, Including F			Kind of Le		Federal-S	_esse Na.	
Frontier "B				#3		Kutz Ga	Trup		State, Fede	erdi cr r ee	rederal- 5.	-073372A	
Unit Letter	E	. : _	23	10 Feet Fro	m The	North	ne and	790	Feet Fro	m The	West		
	Λ		•	mahin 27 N	orth	Range	11 Wes	t , NMPN	4		San Juan	Co	
Line of Section			Tow	mship Z/ N		Runge		, IVMEN	u1 ₀			County	
DESIGNATION C	F TRA	NSF	ORT	ER OF OIL			\s	· · · · · · · · · · · · · · · · · · ·	******		af also feed		
Name of Authorized					ondensate		1				of this form is to b		
Permian Name of Authorized	Planspo				or Dr	y Gas 🗔					New Mexico		
	•				-	_	İ						
If well produces oil give location of tan		is,		Unit Sec	Tw	. Age.	ls gas o	ctually connec	ted?	When			
If this production i		ingle	d wit	h that from an	y other l	ease or pool,	give con	mingling orde	er number:				
COMPLETION D					il Well	Gas Well	New We		Deepen	Plug	ock Same Res'v.	Diff. Pesty.	
Designate Ty	pe of C	omp	letio		/II ##II	i Gus well	!	1	Deopen	1			
Date Spudded				Date Compl. F	leady to P	rod.	Total D	epth .		P.B.T	.D.	·	
							<u> </u>	6 5		Tubin	Depth		
Elevations (DF, RK	B, RT, C	GR, e	tc.j	Name of Produ	icing Form	nation	Top On	/Gas Pay		a mahin			
Perforations				<u> </u>						Depth	Casing Shee		
					-								
				TUBING, CASING, AND							SACKS CEMENT		
HOLE	SIZE			CASING & TUBING SIZE				DEPTH SET			SACAS CEMENT		
							<u> </u>						
					DIF		<u> </u>		of land	i	t be equal to or exc		
TEST DATA AN	D REQ	UES	1 1	OK ALLOWA	DLE (able for this d	epth or be	for full 24 how	rs)		. Ve equal to or exc	200 107 011020	
Date First New Oil	Run To	Tank	5	Date of Test			Product	ng Method (Fla	ow, pump, gai	i lift, etc.)			
			Tubing Pressure			Casing	Casing Pressure Choke			Size			
Length of Test										ctive			
Actual Prod. During	g Test			Oil-Bbls.			Water-	Bbl.	R	Gala	MATE		
<u></u>				<u> </u>					-	2 2 2	20.5		
GAS WELL									JA	N 12 19	978		
Actual Prod. Test-	MCF/D			Length of Te	nt		Bbls. C	ondensate/MM	CF OIL	CO /Erect	Met Condensate		
					- / :			Pressure (Shu		DIST 3	517		
Testing Method (pi	tot, back	: pr.)		Tubing Press	me (Punc	-10)	Casing	Nasema Come					
CERTIFICATE	OF CO	MPI	JAN	CE			1	OIL	CONSER	VATION	COMMISSION	• • •	
. CERTIFICATE OF COMPLIANCE						IAN 1 2 1978							
I hereby certify that the rules and regulations of the Oil Conservation				AFFROYED									
Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.						BY_	By Original Signed by A. R. Kendrick						
						TITL	TITLE SUPERVISOR DIST.						
							This form is to be filed in compliance with RULE 1104.						
Clarkyan							If this is a request for allowable for a newly drilled or despened						
District Production Manager								well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.					

(Title) 1-1-78

(Date)

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.