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SANTA FE	1		
FILE	1	سن	
U.S.G.S.			
LAND OFFICE		T T	
RANSPORTER	OIL	1	
	GAS	1	
OPERATOR		Ì	
PROBATION OFFICE			

## NEW MEXICO OIL CONSERVATION COMMISSION

Form C-104 Supersedes Old C-104 and Effective 1-1-65	<b>C-</b> 110

SANTA FE /	REQUES	T FOR ALLOWABLE	Supersedes Old C-104 and C-1	
U.S.G.S.	ALITHORIZATION TO TE	AND  AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS		
LAND OFFICE	ASTRONIZATION TO TI	VANOR ORT OIL AND NATUR	TAL GAS	
TRANSPORTER GAS /				
OPERATOR /				
I. PRORATION OFFICE  Operator				
	Company Incorporated			
Address				
Reason(s) for filing (Check proper	Building, Houston, Texas	77002 Other (Please explain		
New Well	Change in Transporter of:		,	
Change in Ownership	Oil Dry ( Casinghead Gas Cond	Gas ensate		
If change of ownership give nam		ensure		
and address of previous owner _	<b>.</b> €			
I. DESCRIPTION OF WELL AN	ND LEASE			
Lease Name H <b>uerfanito</b>	Well Nc. Pool N	dame, Including Formation	Kind of Lease	
Location		Basin Dakota	State, Federal or Fee Federal	
Unit Letter A ; 1	1190 Feet From The North	ine and 1190 Feet F	From The <b>East</b>	
Line o: Section 17	Township 27-N Range	9-W , NMPM, San	Tuan	
			Juan County	
Name of Authorized Transporter of	ORTER OF OIL AND NATURAL G	AS Address (Give address to which of	approved copy of this form is to be sent)	
McNood Petroleum Ma		P.O. Box 1702, Farm:	ington, New Mexico	
Name of Althorized Transporter of El Paso Natural Gas		Address (Give address to which o	approved copy of this form is to be sent)	
If well produces oil or liquids,	Unit Sec. Twp. Rge.	P.O. Box 1492, E1 Page 1s gas actually connected?	When	
give location of tanks.	A 17 27-N 9-W		Est. June 1966	
If this production is commingled. COMPLETION DATA	with that from any other lease or pool	, give commingling order number:		
Designate Type of Comple	etion - (X)	New Well Workover Deepe	n Plug Back Same Res'v. Diff. Res'v.	
Date Spud led	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
1-13-66	3-2-66	6,9651	6,964'	
Basin Dakota	Name of Producing Formation <b>Dakota</b>	Top Oil/Gas Pay 66641	Tubing Depth 6638	
Perforatio :s 6664-6672',	6724-6736', 6744-6756', 6	804-6810', 6818-6823',		
6828-68341 (	ES)	D CEMENTING RECORD	6963.561	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
12-1/4"	8-5/8**	292,11'	250	
7-7/8"	4-1/2"	6963,561	576-2-4-1/2" DV Tools	
	2+3/8"	6638,291		
. TEST DATA AND REQUEST OIL WELL	FOR ALLOWABLE (Test must be a	after recovery of total volume of load epth or be for full 24 hours)	oil and must be equal to a exceed top allow-	
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, go		
Length of Test	Tubing Pressure	Contra Bosses	MULITLE	
	raping Flessure	Casing Pressure	Chok Size JUNI 3 1966	
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MODIL UEN. COM.	
			0107.3	
GAS WELL				
Actual Frod, Test-MCF/D 750	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size	
Back pressure	495#	720#	Adj.	
CERTIFICATE OF COMPLIA	NCE	OIL CONSER	RVATION COMMISSION	
I hereby certify that the rules and	d regulations of the Oil Conservation	APPROVED JUN	1 3 1966 , 19	
Commission have been complied	with and that the information given he best of my knowledge and belief.	By Original Signed	d by Emery C. Arnold	
- <del>-</del>	<u> </u>	11		
No.		TITLE SUPERVISOR DIST. #3		
- 27aun	Smith	This form is to be filed in compliance with RULE 1104.  If this is a request for allowable for a newly drilled or deepened		
	I		npanied by a tabulation of the deviation ecordance with RULE 111.	
Senior Staff Engineer	Title)	<b>1</b>	must be filled out completely for allow-	
June 8, 1966		, r	Wells. III, and VI only for changes of owner,	
(I	Date)		porter, or other such 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.