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OPERATOR		3	
PRORATION OFFICE			
Crardioi			

	DISTRIBUTION 7 SANTA FE /	1	ONSERVATION COMMISSION FOR ALLOWABLE AND	Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65				
	U.S.G.S. LAND OFFICE TRANSPORTER OIL / GAS / OPERATOR PRORATION OFFICE Crergion	AUTHORIZATION TO TRA	NSPORT OIL AND NATURAL G	AS				
İ	Control Contro							
	P. O. Drawer 570, Farm Reoson(s) for filing (Check proper box) New Well Recompletion Change in Ownership If change	Change in Transporter of: Oil Dry Gas Casinghead Gas Conden	Other (Please explain)					
I.	I. DESCRIPTION OF WELL AND LEASE Lease Name Hanks #22 Fulcher Kutz Pictured Cliffs State, Federal SF-077874 Location Unit Letter Hanks Hanks Hanks Location Location Line and B50 Feet From The East							
	Unit Letter 'H; 176							
) West , NMPM,	San Juan County				
1.	DESIGNATION OF TRANSPORT Name of Authorized Transporter of Off	TER OF OIL AND NATURAL GA	S Address (Give address to which approve	ed copy of this form is to be sent)				
	Name or Authorized Transporter of Cas Southern Union Gatheri		Address (Give address to which approve Fidelity Union Tower, I Is gas actually connected? When	Dallas, Texas 75201				
	give location of tanks. If this production is commingled wit	h that from any other lease or pool,	give commingling order number:					
	COMPLETION DATA Designate Type of Completion	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Resty. Diff. Resty.				
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.				
	Elevations (DF, RKB, RT, GR, etc.;	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth				
	Perforations			Depth Casing Shoe				
	TUBING, CASING, AND CEMENTING RECORD							
	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 allow								
•	OH. WELL Date of Test Date of Test Producing Method (Flow, pump, gas lift, etc.)							
	Length of Test	Tubing Pressure	Casing Pressure	Choxe Size				
	Actual Prod. During Test	Oil - 3b.s.	Water-Bbls.	Gas-MCF				
	Actua, Prod. During 1001							
GAS WELL								
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate				
	Testing Method (picht, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Sies				
/I. CERTIFICATE OF COMPLIANCE		OIL CONSERVA	TION COMMISSION					
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.			APPROVED					
			By Original Signed by A. R. Kendrick					
The second secon		TITLE SUPERCOS DIST. 45						
(This form is to be filed in compliance with RULE 11 If this is a request for allowable for a newly drilled o			benegesb to beiling viwer a new shie				
		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.						
		ate)	Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporten or other such change of condition. Separate Forms C-104 must be filed for each pool in multiply completed wells.					