NO. OF COPIES REC	<i>F F F F F F F F F F</i>		
DISTRIBUTE			
SANTA FE	1		
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U.S.G.S.			
LAND OFFICE			
IRANSPORTER	OIL	/	
	GAS	1	
OPERATOR		1	
PRORATION OF			

	DISTRIBUTION SANTA FE FILE U.S.G.S. LAND OFFICE TRANSPORTER NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE AND AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS Form C-104 Supersedes Old C-104 and C-11 Effective 1-1-65												
1.	OPERATOR / PRORATION OFFICE Operator	Minerals Corporation											
	Address												
	Reason(s) for filing (Check proper box New We!! Recompletion Change in Ownership	Change in Transporter of: Oil Dry Go Casinghead Gas Conde	Other (Pleas	e explain)									
	If change of ownership give name and address of previous owner												
II.	DESCRIPTION OF WELL AND LEASE												
	Lease Name Marron	Well No. Pool Name, Including F #6 Blanco Mesa	_	Kind of Lease State, Federal or F	°Federal	Lease No. NM0 3605A							
	Unit Letter K : 152	O Feet From The South Lin	ne and <u>1670</u>	Feet From The	West								
	Line of Section 24 Tov	waship 27N Range 80	NMPN, NMPN	A. San Ju	an	County							
111.	DESIGNATION OF TRANSPORT	rer of oil and natural ga	As Address (Give address	to which approved co	opy of this form is t	o be sent)							
	Inland Corporat Name of Authorized Transporter of Cas	ion singhead Gas or Dry Gasy	5101 E. Mai	n, Farming	ton, N.M.	87401							
	EPNG	X	P.O. Box 14		o, Texas	1							
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. K 24 27N 8W	Is gas actually connec		r Future								
	If this production is commingled wit COMPLETION DATA	th that from any other lease or pool,		r number:									
	Designate Type of Completion	on - (X) Gas Well X	New Well Workover	Deepen Pluc	g Back ¦Same Res	stv. Diff. Restv.							
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B	.T.D.								
	12-8-73 Elevations (DF, RKB, RT, GR, etc.,	3-15-74 Name of Producing Formation	5547 Top Oil/Gas Pay	Tub	ing Depth								
	6662 gl.	Mesa Verde	5287		336 th Casing Shoe								
	• • • • • • • • • • • • • • • • • • • •	4, 5376-80, 5345-51 TUBING, CASING, AN	5327-37, 52	87-93 5	546'								
	HOLE SIZE	CASING & TUBING SIZE	DEPTHS	ET	SACKS CEM	IENT							
	12 1/4" 7 7/8"	8 5/8" 4 1/2"	246' gl 5546		35 Sx 50 Sx								
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 Oil Run To Tanks	Date of Test	Producing Method (Flo	The Bridge	,) \								
	Length of Test	Tubing Pressure	Casing Pressure	1) m	Size								
	Actual Prod. During Test	Oil-Bbls.	Water - Bbls.		-NCF								
	GAS WELL OIL DIST												
ſ	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMC	Gra	vity of Condensate								
	AOF 1469	3 Hours Tubing Pressure (shut-in)	Some Casing Pressure (Shut	-in) Cho	ke Size								
	Testing Method (pitot, back pr.) Back pressure	1003	1003	, 22,	3/4"								
VI.	CERTIFICATE OF COMPLIANC		OIL	CONSERVATIO		N							
	hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given		APPROVED 4-19-74, 19, 19										
above is true and complete to the best of my knowledge and belief.			BY Original Signed by Emery C. Arnold										
		This form is to be filed in compliance with RULE 1104.											
Agent (Title)			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 allowable on new and recompleted wells.										
								4-10-7		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.			
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