Form 9-331 (May 1963)	UNITED STATES	SUBMIT IN TRIPLICATE*	Form approved, Budget Bureau No. 42-R1424.					
(1111) 211337	DEPARTMENT OF THE INT	5. LEASE DESIGNATION AND SERIAL NO.						
	GEOLOGICAL SURVEY	<u> </u>	SF 078281					
SUNI (Do not use this i	6. IF INDIAN, ALLOTTEE OR TRIBE NAME							
OIL GAS WELL WELL	У отнек		7. ENIT AGREEMENT NAME San Juan 29-5 Unit					
2. NAME OF OPERATOR	_		8. FARM OR LEASE NAME					
	ral Gas Company		San Juan 29-5 Unit					
3. ADDRESS OF OPERATOR			9. WELL NO.					
PO Box 990,	Farmington, NM 87401 eport location clearly and in accordance with	any Chata was identified a	10. FIELD AND POOL, OR WILDCAT					
See also space 17 belo At surface	w.)	any State requirements.						
At Bullace	1180'S, 1180'W		Basin Dakota 11. sec., T., R., M., OR BLK. AND					
			Sec. 17, T-29-N, R-5-					
			NMPM					
14. PERMIT NO.	15. ELEVATIONS (Show wheth	er DF, RT, GR, etc.)	12. COUNTY OR PARISH 13. STATE					
	6553 ' GL		Rio Arriba N _m					
16.	Check Appropriate Box To Indica	te Nature of Notice, Report, or C	Other Data					
· N	OTICE OF INTENTION TO:		MENT REPORT OF:					
	PULL OR ALTER CASING	WATER SHUT-OFF	REPAIRING WELL					
TEST WATER SHUTT-OF	MULTIPLE COMPLETE	FRACTURE TREATMENT	1 · · · · · · · · · · · · · · · · · ·					
SHOOT OR ACIDIZE	ABANDON*	SHOOTING OR ACIDIZING	ABANDONMENT*					
REPAIR WELL	CHANGE PLANS	(Other)						
(Other)		(Note: Report results Completion or Recompl	of multiple completion on Well etion Report and Log form.)					
17. DESCRIBE PROPOSET OR proposed work. If nent to this worl.) *	COMPLETED OPERATIONS (Clearly state all per well is directionally drilled, give subsurface	tinent details, and give perticent dates, locations and measured and true vertice	including estimated date of starting any il depths for all markers and zones perti-					
10-17-73	TD 3831'. Ran 121 joints 7'	", 20#, J-55 intermediate	casing, 3819' set at					
	3831'. Cemented with 196 c	cu.ft. cement. WOC 12 ho	urs, held 1200#/30 min.					
	Top of cement at 3100'.							
	•							
10-27-73	TD 8038'. Ran 263 joints 4	TD 8038'. Ran 263 joints 4 1/2", 11.6 and 10.5#, J-55						
	8028' set at 8038'. Float co	ed with 642 cu.ft.						
	cement. WOC 18 hours. T	op of ceme nt at 3200'.						
11-28-73	PBTD 8007'. Tested casing 7921', 7932', 7953', 7959' a							

with 60,000# 40/60 sand and 73,190 gallons treated water. No ball

drops. Flushed with 5370 gallons water.

Form 9-330 (Rey. 5-63)

UNITED STATES

SUBMIT IN DUPLICATE*

Form approved.

	DEPAF		ENT O			TERIOF	?	(See other I structions o reverse side	5. LEASE DESI			
WELL CO	MPLETION	4 OR	RECO	MPLET	ION I	REPORT	AND	LOG*	6. IF INDIAN,	ALLOTTEE OR TRIBE NAME		
1a. TYPE OF WEL		I. ELL	GAS WELL	X D	RY 🗌	Other			7. UNIT AGREE			
b. TYPE OF COM NEW X	WORK D	EEP-	PLUG BACK			*			San Juan	29-5 Unit		
2. NAME OF OPERAT	OVER L E	N L_	J BACK L	LES LES	VR.	Other			_	29-5 Unit		
El Paso	Natural Ga	s Co	mpany						9. WELL NO.			
3. ADDRESS OF OPE	RATOR				···				-	63		
PO Box 9	90, Farmi	ngtor	ı, NM	37401					10. FIELD AND	POOL, OR WILDCAT		
4. LOCATION OF WE At surface	LL (Report loca	tion clea		accordance 1180'S			ements) •	•		kota , m., or block and survey		
At top prod. int	terval reported 1	pelow		1100 5	, 1100				OR AREA	T-29-N, R-5-W		
At total depth				٠. ب		<i>i</i>			Sec. 17,	NMPM		
				14. PE	RMIT NO.	1	DATE ISS	UED	12. COUNTY OR PARISH	13. STATE		
									Rio Arri	ba NM		
15. DATE SPUDDED	16. DATE T.D.	REACHE	D 17. DAT	E COMPL.	(Ready to	o prod.) 18.	ELEVATI	IONS (DF, REE	, RT, GE, ETC.)*	19. ELEV. CASINGHEAD		
10- 11-73 20. TOTAL DEPTH, MD	10-26-	73	K T.D., MD &	12-8-7				2	6553 ' GI			
8038'	21. Pi	8007		TVB 22	HOW M	TIPLE COMPL.,	4	3. INTERVALS DRILLED BY	ROTARY TOOLS 1 0-8038	CABLE TOOLS		
24. PRODUCING INTER	RVAL(S). OF THI			BOTTOM.	NAME (M	(D AND TVD)*		>	1 0 0000	25. WAS DIRECTIONAL		
				,		·- ·· - · · · · ·				SURVEY MADE		
7850-7988'(D		07'N							1 2	7. WAS WELL CORED		
								•	*			
IES, FDC-GF	V; Temp. 1	out ve		NG RECO	RD (Rep	ort all strings	set in w	ell)		no		
CASING SIZE	WEIGHT, LE	./FT.	DEPTH SE			LE SIZE			ING RECORD AMOUNT PULLED			
9 5/8"	32.3#			236'	13	3/4" 225 cu.ft.						
7''	20#			3831'	1	3/4''	19	96 cu. ft.				
4 1/2"	11.6#&10).5#		8038'	6	1/4''	64					
29.		LINE	R RECORD		<u> </u>		30	·	TUBING RECOR	D		
SIZE	TOP (MD)	BOTT	om (MD)	SACKS CI	MENT*	SCREEN (MD	,)	SIZE	DEPTH SET (MD)	PACKER SET (MD)		
								1 1/2"	7983'			
31. PERFORATION REC		ļ										
7850', 7854',				70531	7050'	32.			CTURE, CEMENT	SQUEEZE, ETC.		
				, ,	1939	DEPTH INTE				OF MATERIAL USED		
and 7988' wit	h one shot	per z	zone			7850-7	988.		0.000 = sand;	73,190 gal. water		
								-/2	A HIN	···		
								ott	.fivtb\			
33.*					·	UCTION		1 KF				
DATE FIRST PRODUCT	ION PRO	DUCTION				imping—size a	nd type		2 6 1973 ut-i	rus (Producing or		
DATE OF TEST	HOURS TESTER	, , , , ,		flowing		011 75-		DEC	, 20	snut in		
12-8-73	3	'	3/4"	PROD'S		OIL—BBL.	6/	ASTNCE.	CON. COM.	GAS-OIL RATIO		
FLOW, TUBING PRESS.	CASING PRESSI		ALCULATED	OtLI	BBL.	GASM	CF.	TE	pist 3	IL GRAVITY-API (CORR.)		
SI 2115	SI 2701		4-HOUR RAT			1	9 A OF			(,		
34. DISPOSITION OF G.		r fuel, r	ented, etc.)	.1		1 110		- 1	TEST WITNESSE	D BY		
			· ·			<u>. </u>			B.J. Broug	ghton		
85. LIST OF ATTACH?	MENTS											
36 I harahy contide	that the fare	(ng 2=2	netnoh - 3 '	fann - +1		1.4						
36. I hereby certify	(/ wy	na Frid	attached in	цогшат10 п			- 14 M.	ermined from				
SIGNED 2	2 24	-20		_ TI	LE DI	illing Cle	erk		DATE [December 17, 1973		

INSTRUCTIONS

General: This form is designed for submitting a complete and correct well completion report and log on all types of lands and leases to either a Federal agency or a State agency, or both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State edite. See instructions on items 22 and 24, and 33, below regarding separate reports for separate completions. See instructions on items 22 and 24, and 33, below regarding separate reports for separate completions. See instructions are this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric, etc.), formation and observers, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. All attachments tion and pressure tests, and directional surreys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State should be listed on this form, see item 35. or Federal office for specific instructions.

Hem 18: Indicate which elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments.

Hem 22 and 24: If this well is completed for separate production from more than one interval zone (multiple completion), so state in item 22, and in item 24 show the producing interval.

Interval, or intervals, top(s), bottom(s) and nathre(s) (if any) for only the interval reported in item 33. Submit a separate report (page) on this form, adequately identified, for each additional interval to be separately produced, showing the additional data pertinent to such interval. item 29: "Sacks Cement": Attached supplemental tatords for this well should show the details of any multiple stage cementing and the location of the cementing tool. Item 33: Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)

		TRUE VERT. DEPTH	
	TOP	MEAS. DEPTH	no 5324' 5696' 6757' 7699' 7837'
	22 24 2		Pictured Cliffs Mesa Verde Point Lookout Gallup Greenhorn Graneros Dakota
AND SHO	DESCRIPTION, CONTENTS, ETC.		
DEPTH INTERVAL TESTED, CUSHION UNED, TIME TOOL OFFI, FLOWING	BOTTOM		
testes, cosmon	TOP		
	FORMATION		

871-237

			_				
NO. OF COPIES REC	1_5						
DISTRIBUTIO							
SANTÀ FE	1						
FILE	1						
U.S.G.S.		L_					
LAND OFFICE		L					
TRANSPORTER							
TRANSI OILI ER	11						
OPERATOR							
PRORATION OF	PROBATION OFFICE						

ŀ	SANTA FE		OR ALLOWABLE	Supersedes Old C-104 and C-110				
	FILE	KEQUEST 1	AND	Effective 1-1-65				
Ì	U.\$.G.\$.	AUTHORIZATION TO TRAN	SPORT OIL AND NATURAL GAS					
	LAND OFFICE	AUTHORIZATION TO TRAI	TO CIT OIL AND NATORAL OAD					
	OIL /							
	TRANSPORTER GAS I	•						
	OPERATOR ,							
_	PRORATION OFFICE							
I.	Operator	· · · · · · · · · · · · · · · · · · ·						
	El Paso Natural (Gas Company						
	Address							
	PO Box990, Farm	ington, NM 87401						
	Reason(s) for filing (Check proper box)		Other (Please explain)					
	New Well	Change in Transporter of:		1				
	Recompletion	Oil Dry Gas						
	Change in Ownership	Casinghead Gas Condens	sate	·				
	If change of ownership give name							
	and address of previous owner	· · · · · · · · · · · · · · · · · · ·						
**	DESCRIPTION OF WELL AND I	FACE						
11.	DESCRIPTION OF WELL AND I	Well No. Pool Name, Including For	rmation Kind of Lease	Lease No.				
	San Juan 29-5 Uni	t 63 Basin Dakota	State (Federal o) F	•• SF 078281				
	Location Danie July 2001							
	34 1100	South the	and 1180 Feet From The	West				
	Unit Letter M ; 1180	reet From The DOUGH Eme						
	Line of Section 17 Tow	nship 29N Range	5W , NMPM, Ric	Arriba County				
	Eine of Section							
111	DESIGNATION OF TRANSPORT	ER OF OIL AND NATURAL GAS	5					
	Name of Authorized Transporter of Cil	or Condensate X	Address (Give address to which approved c	opy of this form is to be sent)				
	El Paso Natural (Gas Company	PO Box 990. Far	mington, NM 87401				
	Name of Authorized Transporter of Cas	inghead Gas or Dry Gas 🔀	Address (Give address to which approved c	opy of this form is to be sent)				
	El Paso Natural (PO Box 990. Far	mington, NM 87401				
		Unit Sec. Twp. Ege.	Is gas actually connected? When					
	If well produces oil or liquids, give location of tanks.	M 17 29N 5W	!					
		1	ing commingling order number:					
		h that from any other lease or pool, g	live comminging order number.					
IV.	COMPLETION DATA		New Well Workover Deepen Pl	ag Back Same Resty. Diff. Resty.				
	Designate Type of Completio	n - (X)	X					
•	Date Spudded	Date Compl. Ready to Prod.	Total Depth P.	B.T.D.				
	10-11-73	12-8-73	8038'	8007'				
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top OX/Gas Pay	bing Depth				
	6553'GL	Dakota	7850'	7983'				
	Perforations			pth Casing Shoe				
	7850', 7854', 786	50', 7921', 7932', 7953', 7	959' and 7988'	8038'				
		TUBING, CASING, AND	CEMENTING RECORD					
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT				
	13 3/4"	9 5/8"	236'	225 cu, ft.				
	8 3/4"	7''	3831'	196 cu. ft.				
	6 1/4"	4 1/2"	8038'	642 cu. ft.				
		1 1/2"	7983'	tubing				
9,	THE DATA AND PROUEST FO	OR ALLOWABLE (Test must be af	ter recovery of total volume of load oil and	must be equal to or exceed top allow-				
٧.	OIL WELL	able for this de	pro 0. 00 jo: j=== = ;					
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, et	en accent				
				- KIIII				
	Length of Test	Tubing Pressure	Casing Pressure	noke ske TEULIFED				
				BONCE DEC 9 0 1072				
	Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	жение DEC 20 1973				
				OIL CON. COM				
				DIST. 3				
	GAS WELL		Table Confession Apres	ravity of Condensate				
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF G					
	4109	3 hrs.	10) 10)	hoke Size				
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in) 2115	Casing Pressure (Shut-in) C 2701	3/4"				
	Calc. AOF	2113						
VI	CERTIFICATE OF COMPLIAN	CE	OIL CONSERVATION	ON COMMISSION				
			DEC 26 1973	, 19				
	I hereby certify that the rules and	regulations of the Oil Conservation	ALL NOTES -					
		with and that the information given best of my knowledge and belief.	By Original Signed by Eme	ry C. Arnold				
	above is true and complete to the	beat of my knows age and weeker						
	,		TITLE _SUPERVISOR DIST. #					
	" 1 o		This form is to be filed in com	pliance with RULE 1104.				
	A. H. Ducos		ll and the second for allowable	a for a newly drilled or despensed				
	Sian Sian	ature)	well, this form must be accompanied tests taken on the well in accordance	NO E LEGITIELION OF THE COLUMN				
	Drilling Clerk	•	tests taken on the well in accordan	oe filled out completely for allow-				
		tle)	II allo on new and recompleted Wells	•				
	December 17, 1	973 .	I man a male de salame 1 11 11	it and VI for changes of owner,				
		ate)	If well name of number, or transporter.	Of Other Beam and				
	12		Separate Forms C-104 must be filed for each pool in multip					

•			
NO. OF COPIES REC		5	
DISTRIBUTIO			
SANTA FE	7		
FILE	7	V	
u.s.c.s.			
LAND OFFICE			
IRANSPORTER			
TRANSFORTER	GAS	1	
OPERATOR	1		
PRORATION OF	ICE		

NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE

Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65

l	FILE		/	V					AND ,			2		•	
ĺ	u.s.c.s.		<u> </u>	L	AU	THOR	IZATION	TO TRAI	NSPORT	OIL AND	NATURAL C	AS			
	LAND OFFICE		 												
	IRANSPORTER	OIL	1-;-	-					٠						
1		GAS	1		ł										
	PROPATION OF	FICE	 	 	1										
1.	Operator Operator	FICE	<u>i</u>	1—	l					 		···			
	North	west !	Pipe	line	e Corpo	ratio	on								
	Address														
	501 A	irport	t Dr	ive	, Farm	ingto	on, New	Mexico	8740	1			···		
	Reason(s) for filing	(Check)	proper	box)						Other (Pleas	e explain)			į	
	New Well	H				ige in T	Transporter o							1	
	Recompletion	. 낡			Oil	nghead		Dry Gas Condens	₩						
	Change in Ownersh	1PKT								<u> </u>					
	If change of owner	ship giv	e nat	we E.	Pasn	Natiu	ral Gas	Compan	v. PO	Box 990.	Farmingto	n. New l	Mexico	87401	
	and address of pre	vious ov	vner.						,,,,		<u> </u>				
11	DESCRIPTION (OF WEL	L A	ND I	LEASE										
•••	Lease Name			Well	No. F	ool Name, 1	ncluding Fo	rmation		Kind of Leas State, Federa			Lease No.		
	San Juan 29	9-5 Un	<u> it</u>		6	3	Basin D	Dakota	· ·····		State, P Xero			SF078281	
	Location				•		0-		-	1100		T/To adv			
	Unit Letter	M	_ ;	118	UFee	l From	The SC	outh Line	and	1180	Feet From	The West			
		17		T-0.1	vnship	29N	,	Range <u>F</u>	5W	, NMP	M. Rio Arr	iba		County	
	Line of Section			100	· iisiiip	2711				<u> </u>					
H	DESIGNATION (OF TRA	ANSF	ori	TER OF	OIL A	AND NATU	URAL GA	s					,	
	Name of Authorized	d Transpo	orter c	110 1		or Cor	ndensate 🗶)	Andress		to which appro			1	
	North	hwest	Pipe	eline	e Corpo	ratio	on		501	Airport L	rive, Far	mington,	New M	exico 87401	
	Name of Authorized	d Transpo	Dine	of Cas	e Corpo	as ∐ oroti	or Dry G	as X	501	Airport I	Drive. Far	mington,	New M	exico 87401	
	North	211116	TUnit	Sec.	Twp.	P.ge.	<u> </u>	tually connec							
	If well produces oil or liquids, give location of tanks. M 17 29N 5W										i				
	If this production				<u> </u>	<u> </u>			rive com	mingling ord	er number:				
ıv	If this production COMPLETION I	is comm DATA	ingie	d WI	in that in	on any						75. 5.	16	Tour Books	
	Designate Ty		`	latio	n – (Y)	Oil	i Weli (Gas Well	New Well	Workover	Deepen	Plug Back	Same nes	s'v. Diff. Res'v.	
		ype or c	Joinp				-du to Drod		Total De	nth		P.B.T.D.			
	Date Spudded				Date Co.	iipi. Ne	ady to Prod.	•	, , , , ,						
	Elevations (DF, RI	KB. RT.	GR. e	tc. i	Name of	Produc	ing Formatio	on	Top O!1/	'Gas Pay		Tubing Der	oth		
					j				<u> </u>			1	- Chan		
	Perforations									•		Depth Cast	ng shoe		
									CEUEN	TINC BECC	100				
							& TUBING		CEMER	TING RECO		S	ACKS CEN	MENT	
	HOLI	ESIZE			+	SING	a robino	3,22							
					-										
									<u>i </u>			<u> </u>			
V.	TEST DATA A	ND REG	UES	T F	or all	OWAE	BLE (Tes	it must be a	fier recove	ery of total vo for full 24 ho	lume of load oil urs)	and must be	equal to or	exceed top attou-	
	OIL WELL Date First New Ci	l Bur To	Took	•	Date of	Test		- 70- 1-1-1-	Producis	ng Method (FI	ow, pump, gas l	ift, etc.)	FFFIT		
	Date First New Ci		,	•					/ KLLI I						
	Length of Test				Tubing	Pressur			Casing	Pressure		Shoke Size	Choke Size		
					ļ							FEE) 27 N	74	
	Actual Prod. Durin	ng Test			Ott-Bbl	8.			Water - E	Bbis.		1	20	"* /	
	l				<u></u>				<u> </u>			OIL CON. COM.			
													IST. 3		
	GAS WELL Actual Prod. Test	- MCF/D			Length	of Test			Bble. C	ondensate/MN	MCF	Gravity of	Condensate		
	Notice 1											<u> </u>			
	Testing Method (p	itot, bac	k pr.)		Tubing	Pressu	• (Shut-in	2)	Casing	Pressure (Sh	ut-in)	Choke Size	•		
					<u> </u>			·	╁		001105571	ATION CO	MAISSIC	\\\\\	
VI.	. CERTIFICATE	OF CO	MPI	LIAN	CE					OIL	CONSERVE 2 1 19	74 ION CC	MMISSIC	N	
	•								APPE					. 19	
	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.									Origin	al Signed	by Emery	C. Arn	010	
								BY_			_				
									TITL	E	SUPERVISOR	DIST.	3		
			2	_	,				1	This form is	to be filed in	compliance	with RUL	E 1104.	
	V.B	M	Ze	1	appe	0			11 .			mahla for a	newly dril	led or deepened of the deviation	
				(Sign	alme))			11	taken on th	se mell tu ecc	oldsuce with	1 KOFF	• • •	
	AFFICE SUPERV							<u>`</u>	11 .	All mactions	of this form	ust be filled	l out comp	letely for allow-	
	EED 1 O	1974	l	(T	icle)				able	on new and	recompleted	vens.	VI for chi	anges of owner.	
	1 5 1 3	1014		<u>/D</u>	ate)				well	name or num	ber, or transpo	rten or other	such char	nge of condition.	
				(1)	J /					Separate Fo	rms C-104 mu	st be filed	for each	poor in multiply	
									Separate Forms C-104 must be filed for each pool in multiply completed wells.						

PICTRICT S P.O. Box 1980, Hobbs, 18M 88240 DISTRICT # P.O. Drawn DD, Artesia, NM \$8210

OIL CONSERVATION DIVISION P.O. Box 2088 Santa Fe. New Mexico 8" 504-2088

A money Ash whole protection of contraction

DISTRICT III 1000 Lio Brazos Rd., Aziec, NM 87410	DECLIEST FOR A

KTT KT III		SAU	HH 1 C 1	ACM 1410	MU 6 JU	4-2000				
STRUTION TO AZING, NIM 87410	REQUE	EST FO	R ALL	OWAE	LE AND	AUTHORI	ZATION			
		OTRA	NSPO	RT OIL	AND NA	TURAL G		Pi Na	/	
PHILLIPS PETROLEUM (COMPANY								•-	
Address			omo		0.7101					
300 W ARRINGTON, SU	TE 200,	FARM	INGTO	N, NM		That exp	العنعا	 		
lew Well		Charge in 1		r of:			•			
Accompletion.	Oil Chainghead	-	Dry Cee Condons	. 8						1
chance of openior give name	<u>-</u>				3535 E.	30th, 1	Farmingt	on, NM 87	401	
to more or became observe.				<u> </u>	3232					
DESCRIPTION OF WELL	- 11	Well No.	Pool Nam	e, Includi	ng Formation			(Leseo	Lean	e No.
SAN JUAN 29-5 U	NIT	63	BAS	SIN D	AKOTA		State, 1	federal or Fee		
ocation M	. 118	30	Poet Proce	S	outh	bes	.].80	et Proces The	West	Line
Unit Letter	291	J		5 W		Ri	o Arri	•		
Section Townshi	2	<u> </u>	Range		, 10	IPM,				County
I. DESIGNATION OF TRAN				NATU	RAL GAS			200	is to be come	
tams of Authorized Transporter of Oil Gary Energy	□ ,	er Condeas	4 (2	\Box				omfield,		7413
hame of Authorized Transporter of Carls;			or Dry Co	• (XX)				copy of this form		
Northwest Pipeline Con		iec i	Twa	Res	P.O. Bo:			tah 8415 Attn: C1		tter
ve location of tanks.	<u>i i</u>	i	Ĺ				i			
this production is commissied with that V. COMPLETION DATA	from any other	kan or p	oal, give	omming!	ing order numb					
		Ol Well	Cas	Well	New Well	Workover	Deepes	Plug Back Sa	ne Res'v	XIII Res'v
Designate Type of Completion	- (X) Date Compt.	Restr to 1	ᆜᅳ		Total Depth	·	11	PATA		
nde Speddel		,						7.2.12		
levations (DF, RKB, RT, GR, etc.)	Name of Pro	ducing For	tostice		Top Oil/Gas I	ay		Tubing Depth		
erformicas	L							Depth Casing S	bos	
		12210				IO DECOL		<u> </u>		
HOLE SIZE		NG & TUE			CEMENTE	DEPTH SET		SAC	KS CEMEN	п
1,702										
										
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IL WELL (Test must be after to the First New Oil Rus To Task	Date of Test	i icame o	1000 00	ent musi	Producing Me	thod (Flow, p	ump, gas ift, o	e)		
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angth of 31t	Tubing Press	U75			Cathol Hose			H87 @ 10	ս 12. մ <i>ի</i>	" ^{(C} []
ctual Prod. During Test	Oil - BMs.				Water - Bbls.			Giá MCF A D I	01 139	12
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L OPERATOR CERTIFIC	ATE OF C	COMP	LIANC	Œ			UOEDV	ATION D	NICIO	
I hereby certify that the rules and regula Division have been complied with and t	tions of the O	d Conserv	ation		'	JIL COI	NOEHV	ATION D		•
is true and complete to the best of my is	nowledge and	belief.			Date	Approve	ed	APR 0 1	1331	
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L. E. Robinson Si	r. Drlg.	£ D~	od F	ner	By_	· · · · · · · · · · · · · · · · · · ·		r) (3/	<u> </u>	
Printed Name			Tide	ng.	Title		SUPE	RVISOR DI	STRICT	13
ADD 0 1 1001 (505) 509	-3412			11 1111/0					

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance

Telephone No.

with Numer 11.

2. All sections of this form must be filled out for allowable on new and recompleted wells.

3. Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.

4.) Separate? orm C-104 must be filed for each pool in multiply completed wells.