Market Control of the Control of Market Control of the Control of	-		
DISTRIBUTION	NEW MEYICO OU C	CONSERVATION COMMUNICATION	
SANTA FE /		ONSERVATION COMMISSION FOR ALLOWABLE	Form C-104 Supersedes Old C-104 and C-11
FILE /		AND	Effective 1-1-65
U.S.G.S.	AUTHORIZATION TO TRA	ANSPORT OIL AND NATURAL GA	NS .
015 2	1		
19ANSPORTER CAS			
OPERATOR /	,		
PROPATION GEFICE			
Suburban Propar	ne Gas Corp.		
2120 Alamo Nati	onal Bldg.; San Anto	nio, Texas 78205	
Reason(s) for filing , (beck prope. but New Well	Change In Transporter ci:	Other (Flease explain) 	
Reconstruction	Off X City Ga	Effective Dat	e: 3-1-75
Change Ownership	Castnghead Gas Conder	nsate	
If change of ownership give name and address of previous owner			W
DESCRIPTION OF WELL AND	LEASE Well No.; Pool Name, Including Fo	ormation Kind of Lease	lease No.
NW Cha Cha Unit 17			or Fee Federal 1420-603-
Location			
Unit Letter M : 5	10 Feet From The S Lin	e and 510 Feet From Th	e <u>W</u>
Line of Section 17 Tox	wnship 29N Range	14W , NMPM,	San Juan County
	TER OF OIL AND NATURAL GA		
Name of Authorized Transporter of Oil		Address (Give address to which approve	· ·
Name of Authorized Transporter of Cas	singhead Gas or Dry Gas	ot sale only) Box 15 Address (Give address to which approve	d copy of this form is to be sent)
If well produces oil or liquids, anye location of tanks.	Unit Sec. Twp. Rge. G 21 29 N 14W	Is gas actually connected? When	
If this production is commingled with COMPLETION DATA	th that from any other lease or pool,	give commingling order number:	AFILITA .
Designate Type of Completic	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Fie W. Lin. Res'v.
Date Spudded	Date Compl. Ready to Fire	Total Depth	P.B.TD. 1915
Elevations Lift, PNI, RI, GR, etc.,	Name of Froducing Form 15	Top CU/Gis Pay	Tubine Depar ED
Perforations	<u> </u>	COM	Depth Caturia Shoe
	TUBING, CASING, AND	CEMENTING RECORD 3	
HOLE SIZE	CASING & TUBING SIZE	CEPTE LET	SACKS CEMENT
TEST DATE IND REQUEST FO		fter recovery of total volume of load oil an	d must be equal to or exceed top allow-
OIX. WEY!	able for this de	pth or be for full 24 hours) Producing Method (Flow, pump, gas lift,	etc.)
ु वार्ष्टर के जाती हैं			
Length : () we	Tubing Pressure	Casing Pressure	Choke Size
Actual Fled. During Test	Oil-Bbis.	Water - Bbls.	Gas - MCF
GAS WELL			
Astadi Frod. 1681-MCF/D	Length of Teet	Bbis. Condensate/MMCF	Gravity of Condensate
The second secon	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
Testing Wethod (pitot, back pr.)	TADIM Classics (SURC.TR)		
CERTIFICATE OF COMPLIAN	CE	OIL CONSERVAT	TON COMMISSION
		APPROVED	FEB 2,4 1974
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.		Original Signed by Emery C. Arnold	
		SUPERVISOR DIST. #3	
		TITLE	
Mulil Soch		This form is to be filed in co	mpliance with RULE 1104.
Alish Jack D. Cook (Signature)		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	

Auth Isk	Jack	D.	Cook
(Signature)			
Agent			

(Title)

3-1-75 (Date)

its 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.

Fill cut 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.