ĺ	NO. OF COPIES RECEIVED	8 000	•		
	DISTRIBUTION	3-000 1-7CA NEW MEXICO OIL CONSERVATION COMMISSION		Form C-104	
	SANTA FE /	1-F REQUEST FOR ALLOWABLE		Supersedes Old C-104 and C-116 Effective 1-1-65	
	FILE	AND			
	U.S.G.S.	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS			
	IRANSPORTER OIL /	PORTER :			
	GAS	OF BOTH LOWAR TRUCKING, INC. AND INLAND COURS			
	INC. INIS PERCHADE INCHIDED N. M. C. A.				
I.	Cperator WIANA CORPORATION				
		CLYDE C. LaMAR. PORSIONALY			
	Address 234 Petr. Club Pl	aza, Farmington, N. M.		INLAND CORPORATION	
	Reason(s) for filing (Check proper box)		Other (Please explain)		
	New Well	Change in Transporter of:			
	Recompletion Change in Ownership	Casinghead Gas Condens			
	If change of ownership give name and address of previous owner				
		r E 4 0 E			
11.	DESCRIPTION OF WELL AND LEASE Lease Name Well No. Fool Name, Including Formation Kind of Lease Federal & Fee				
	Fogelson 3-8	1	Basin Dakota	State, Federal or Fee	
	Location				
	Unit Letter ; 25	10 Feet From The South Line	e and <u>1650 </u>	rom The	
	Line of Section 8 , Tow	vnship 2011 Range	, NMPM,	San Juan County	
			~		
iII.	Name of Authorized Transporter of Cil	rer of oil and natural gas or Condensate	Address (Give address to which o	approved copy of this form is to be sent)	
	Letter Trucking, 1		PO Box 1528, Farmington, N. M.		
	Name of Authorized Transporter of Cas	singhead Gas or Dry Gas	Address (Give address to which a	approved copy of this form is to be sent)	
		Unit Sec. Twp. Rge.	Is gas actually connected?	When	
	If well produces oil or liquids, give location of tanks.	J 8 29N 11W	-		
	If this production is commingled wit	th that from any other lease or pool,	give commingling order number	:	
	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepe		
	Designate Type of Completic				
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
		Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
	Pool	Nume 6. Producing 1 officiation	100 011/ 045 1 4/		
	Perforations	<u> </u>	-	Depth Casing Shoe	
	TUBING, CASING, AND CEMENTING RECORD				
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
V.	TEST DATA AND REQUEST FO	OR ALLOWABLE (Test must be a)	fter recovery of total volume of loa	nd oil and must be equal to or exceed top allow	
•	OIL WELL	able for this de	pth or be for full 24 hours) Producing Method (Flow, pump,		
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Frow, pump,	gus tijt, etc.)	
	Length of Test	Tubing Pressure	Casing Pressure	WALLEY !	
			Water-Bbls.	MCF 190	
	Actual Prod. During Test	Oil-Bbls.	water-Bbis.	Mr. S. Jacow.	
			<u> </u>	MAR 3 COM.	
	GAS WELL			OIL CIET.	
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Cavity of Condensat	
	Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size	
VI.	. CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION		
	I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given		APPROVED MAR 9	1965 , 19	
				,	
	above is true and complete to the best of my knowledge and belief.		TITLE Supervisor Dist. # 3		
	Outside all 1		TITLE		
)L	Original signed by: OHN T. HAMPTON		ed in compliance with RULE 1104.	
	(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		
	Manager Manager	augum u j	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.		
	(Ti	itle)			
	March 8, 1965	ate!	Fill out Sections I, I well name or number or train	I, III, and VI only for changes of owner nsporter, or other such change of condition	
	(D	ate)	or mamber, or true		

Separate Forms C-104 must be filed for each pool in multiply completed wells.

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