							/		
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NEW MEXICO OIL				CONSERVATION COMMISSION FOR ALLOWABLE			Form C-104 Supersedes Old C-104 and C-1.		
FILE						Effective 1-1-65			
U.S.G.S.	, AL1	THODIZATION	ANE	, RT OIL AND N	ATUDAL C	٨٥			
LAND OFFICE	AU	INURIZATION	TO TRANSPO	RI OIL AND N	ATURAL G	AS			
OIL /									
TRANSPORTER									
OPERATOR									
PRORATION OFFICE									
Operator							·	-	
10 21	ata Gatheri	ac Caratem 1	rna.						
Address	ava cameri	TR DAR CHEEF 1	uic.						
Reason(s) for filing (Check pro	Eox 717 - 1	entaington,	New Mexico	Other (Please e	enlain)				
New Well		ge in Transporter c		Office (1 tease 8	explain)				
	Cil	ge In Transporter c	_						
Recompletion		, , ,	Dry Gas	=					
Change in Ownership	Casin	ghead Gas	Condensate	;					
DESCRIPTION OF WELL Lease Name		No. Pool Name, Including Formation				Kind of Lease			
Location Houck	12	3-12	3-22 Basin Dakota			State, Federal or Fee			
_									
Unit Letter G ;	Feet	From The	Line and _		Feet From T	he			
Line of Section 12	, Township 💃	2 9-N B	ange 16-W	, NMPM,	Can Tue	-		County	
		, <u>, , , , , , , , , , , , , , , , , , </u>			Our Gue	<u> </u>			
DESIGNATION OF TRANS	SPORTER OF O	OIL AND NATU	RAL GAS						
Name of Authorized Transporte		or Condensate 🗶		ss (Give address to	which approv	ed copy of th	his form is to be	sent)	
יזנופירווו	vestiem Tank	ers. The.		Box 2077 -	Fermine	ton. Ne	w Movino		
Transwestern Tankers, Inc. Name of Authorized Transporter of Casinghead Gas or Dry Gas X				Box 2077 - Farmington, New Mexico Address (Give address to which approved copy of this form is to be sent)					
El Paso Matural Gas Company				Box 990 - Farmington, New Mexico					
Init Sec Two Rose				actually connected		n n	MEALCO		
If well produces oil or liquids, give location of tanks.				-					
give recution of tunks.	, G	12 29N	TOM	Yes					
If this production is comming COMPLETION DATA	gled with that from	n any other lease	or pool, give c	ommingling order	number:				
		Oil Well G	rs Well New V	vell Workover	Deepen	Flug Back	Same Restv.	Diff. Res'v.	
Designate Type of Cor	npletion — (X)	1	1	1 1	I I	! !	1		
Date Spudded	Date Com	ol. Ready to Prod.	Total	Depth	!	P.B.T.D.			
		-		•					
Pool	Name of E	roducing Formation	Top C	Top Oil/Gas Pay			Tubing Depth		
1 00/1	14dine Of 1	.casoning a ormation		Top On/ Gue ruy			Lazing Doptii		

Diff. Res'v. Depth Casing Shoe Perforations TUBING, CASING, AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT (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) V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL Date of Test Producing Method (Flow, pump, gas lift, etc.) Date First New Oil Run To Tanks Choke Size Length of Test Casing Pressure Tubing Pressure Water-Bbls. Gas - MCF Actual Prod. During Test Oil-Bbls.

GAS WELL Actual Frod. Test-MCF/D ength of Test Bbls. Condensate/MMCF MAR 11 1965 Testing Method (pitot, back pr.) Tubing Pressure Casing Pressure Cho OIL CON. COM

VI. CERTIFICATE OF COMPLIANCE

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.

Signature)

March 9, 1965

C. Beeson Weal, Agent in Farmington

OIL CONSERVATION COMMISSION

APPROVED MAR 11 1965

BY Original Signed Emery C. Arnold

TITLE Supervisor Dist. # 3

This form is to be filed in compliance with RULE 1104.

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.

Fill out Sections I, II, III, and VI only 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.