NO. OF COPIES REC	5		
DISTRIBUTION			
SANTA FE	/		
FILE	7		
U.S.G.S.			
LAND OFFICE			
IRANSPORTER	OIL GAS	/	
OPERATOR	1		
PRORATION OF			
Operator	•		
Address			

NEW MEXICO OIL CONSERVATION COMMISSION

Form C -104

SANTA FE		REQUEST	REQUEST FOR ALLOWABLE Supersedes Old C-104 and C- Effective 1-1-65		
FILE U.S.G.S.		AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL AAS			
LAND OFFICE		AUTHORIZATION TO TRA			
IRANSPORTER	OIL /			TETROLEUM CORP.	
	GAS /		PUBCO PETROLEUM CORP. MERGED INTO MESA PETROLEUM CO. MERGED INTO MESA PETROLEUM CO.		
OPERATOR PROPATION OF	FICE	-	W	ERGED INTO MESA PETRO EFFECTIVE MAY 1, 1973	
Operator Operator	1,62				
		PURCO EMER	OLEUM CORP.		
Address		D. A. Gara	Anton Morr Joydan (VI	0.743	
Reason(s) for filing	(Check proper box	e)	, Aztec, New Mexico 074 Other (Please explain)	+	
New Well		Change in Transporter of:			
Recompletion		Oil Dry Ga	s From Plateau,	Treornorated	
Change in Ownersh	IP	Casinghead Gas Conder	isule 227 11 Out 11 doctor,	and our pour to our	
If change of owner and address of pre					
II. DESCRIPTION (Lease Name	OF WELL AND	Well No. Pool Name, Including F	ormation Kird of Lo.	ise Lease No.	
I	ederal	10 Basin Dako	Da Skus Fede	7.1. (40.4. Miles)	
Location		_		3 hart	
Unit Letter	_)0;99	Feet From The <u>South</u> Lin	e and 1600) Feet From	n . he <u> </u>	
Line of Section	<u> </u>	waship 29 March Range	ll West , NMPM,	San Juan County	
	OF TRANSPOR	TED OF OUL AND NATIONAL CA	c		
Name of Authorized	I Transporter of Ci	TER OF OIL AND NATURAL GA	Address (Give address to which app	roved copy of this form is to be sent)	
Inland Cor	ooration		P.C. Dan 1520, Furmin	gionia New Mexico 07401	
Name of Authorized			Address (Give address to which app	roved copy of this form is to be sent)	
If well produces of	tural Gau Co Los Havids	Unit Sec. Twp. Rge.	Is gas actually connected?	501, 187, 2013 07402 Then	
If well produces of give location of tar		0 1 29K 11W			
		ith that from any other lease or pool,	give commingling order number:		
V. COMPLETION I		Cil Well Gas Well	New Well Workover Deepen	Plug Back Same Resty. Utif. Resty.	
Designate Ty	pe of Completi		1		
Date Spudded		Date Compl. Ready to Prod.	Total Depth	F.3.T.D.	
Elevations (DF, RI	(B, RT, GR, etc.,	Name of Producing Formation	Top Cil/Gas Pay	(Stan) Depth	
				1118	
Perforations				Se Sa	
		TUBING, CASING, AND	CEMENTING RECORD	2 0 × 2 / 2 / 2 / 2 / 2 / 2 / 2 / 2 / 2 / 2	
HOLE	ESIZE	CASING & TUBING SIZE	DEPTH SET	O OKS CEMENT	
			\	W 01	
	D REQUEST F	FOR ALLOWABLE (Test must be a	fter recovery of total volume of load o pth or be for full 24 hours)	il and must be equal to or exceed top allow	
OIL WELL Date First New Oil	Run To Tanks	Date of Test	Producing Method (Flow, pump, gas	lift, etc.)	
				Choka Siza	
Length of Test		Tubing Pressure	Casing Pressure	Choke Size	
Actual Prod. Durin	g Test	Oil-Bbls.	Water - Bbls.	Gcs - MCF	
	-				
GAS WELL Actual Prod. Test	-MCF/D	Length of Test	Bbls, Condensate/MMCF	Gravity of Condensate	
	:=: / *	·			
Testing Method (p	itot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
	00.000	VGE.	OIL CONSERV	VATION COMMISSION	
VI. CERTIFICATE	OF COMPLIAN	NCE		A = :	
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			
		Original Signed :	by Emery C. Arnola		
	-			SUPERVISOR DIST. #3	
			· · · ·	n compliance with RULE 1104.	
<u> </u>	1/1	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	To abin in a request for all	lowable for a newly drilled or deepened	
	(Sig	nature)	well, this form must be accome tests taken on the well in accome.	panied by a tabulation of the deviation cordance with RULE 111.	
		Foreman	All sections of this form sble on new and recompleted	must be filled out completely for allow	
	(1	*****/	able on new and recombined	T 0.10	

September 24, 1968

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.