	NO. OF COMES RECEIVED	4	
	NOTTUBLETEIC		
	SANTA FE	1	
	FILE	1	V
	U.S.G.S.		
I.	LAND OFFICE		,
	IRANSPORTER GAS	7	
	OPERATOR	1	-
	PRORATION OFFICE,		
	Operator Chaparral Oil &	Ga	s C
	Address P. O. Box B, Az	tec	, ,
	0 / 1 / (1): (0)		1

SANTA FE /	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-110			
1.22		AND	Effective 1-1-65			
U.S.G.S.	AUTHORIZATION TO TRA	ANSPORT OIL AND NATURAL	GAS			
OIL OIL	· · ·	가는 전 				
TRANSPORTER GAS						
OPERATOR /						
PRORATION OFFICE,						
Chaparral Oil & Gas	Company					
Address	N M					
P. O. Box B, Aztec,		01 (01				
Reason(s) for filing (Check proper t	Change in Transporter of:	Other (Please explain)				
New Well $\lambda$	Oil Dry Go					
Change in Ownership	Casinghead Gas Conde	= 1				
If change of ownership give name and address of previous owner	:					
I. DESCRIPTION OF WELL AN	D LEASE					
Lease Name	Well No. Pool Name, Including F	,				
Shelly	#2 Fulcher Kutz	Picture Cliffs State, Feder	rd or Fee Federal \$F-047020 [A			
Location Unit Letter G;	1850 Feet From The North Lin	ne and 1850 Feet From	The East			
Line of Section 34	Township 29 North Range 1	l West , NMPM,	San Juan County			
I. DESIGNATION OF TRANSPO	ORTER OF OIL AND NATURAL GA	As	oved copy of this form is to be sent)			
Name of Authorized Transporter of	Off Condensate	Address (Give dutiess to which app	over copy of this form is to be delity			
Name of Authorized Transporter of	Casinghead Gas or Dry Gas X	Address (Give address to which appr	oved copy of this form is to be sent)			
Southern Union Gath	ering		Building, Dallas, Texas			
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge.	Is gas actually connected? W	/hen			
	with that from any other lease or pool,					
V. COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back   Same Res'v. Diff. Res'v.			
Designate Type of Comple		X				
Date Spudded 2-21-71	Date Compl. Ready to Prod.  2-23-71	Total Depth 1829 *	P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc		Top Oil/Gas Pay	Tubing Depth			
5600 G1	Fulcher Kutz Picture C	liff 1774'	1720'			
Perforations			Depth Casing Shoe			
1774-84, 1726-36		· · · · · · · · · · · · · · · · · · ·	1829'			
	TUBING, CASING, AN	D CEMENTING RECORD				
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT			
9-7/8"	7''	107'	50 Sacks			
6-1/4"	3-1/2"	1829' 1720'	300 sacks			
	TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be aquel to or exceed top allowable for this depth or be for full 24 hours)					
Date First New Off Run To Tanks	Date of Test	Producing Method (Flow, pump, gas	lift, eight Resident			
	Tubing Pressure	Casing Pressure	/Choxe Size			
Length of Test	I doming Pressure		APR 33 1971			
Actual Frod. During Test	Oil-Bhis.	Water-Bbls.	GOUNCE			
			GOIL CON. COM			
			DIST. 3			
GAS WELL		Bbls. Condensate/MMCF	Gravity of Condensate			
Actual Prod. Test-MCF/D	Length of Test	Bots. Condensate/MMCF	Grant or condemnate			
599 Testing Mothod (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size			
Eack Pressure	215	(Dual)	3/4''			
/I. CERTIFICATE OF COMPLI		OIL CONSERV	VATION COMMISSION IN 29 1971			
I herehis contifus that the miles of	nd regulations of the Oil Conservation	ABBBOVED				
Commission have been complis	ed with and that the information given the best of my knowledge and belief.	Original Signed by Emery C. Arnold				
above is true and complete to	the dest of my knowledge and belief	SUPERVI	SUPERVISOR DIST. #3			
1		TITLE				
		This form is to be filed in	n compliance with RULE 1104.			
7/ Mefere la	prolec		lowable for a newly drilled or despended panied by a tabulation of the deviation			
Preside	nt	tests taken on the well in acc	cordance with RULE 111.			
		والمستمث مناه كم مسالمات ووقا	MUST BE THESE OUT COMBISSOLV FOR ELLOWS			

(Title) April 22, 1971 (Date)

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

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.

