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TRANSPORTER	OIL	
	GAS	
OPERATOR		
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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

Operator Beta Development Co.	
Address 234 Petroleum Club Plaza, Farmington, New Mexico	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/>
	Dry Gas <input type="checkbox"/>
	Condensate <input checked="" type="checkbox"/>

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE	
Lease Name Martin 34	Well No. 2-22
Pool Name, Including Formation Basin Dakota	
Kind of Lease Federal & Fee	
State, Federal or Fee	
Location	
Unit Letter O ; 990 Feet From The South Line and 1850 Feet From The East	
Line of Section 34 , Township 30 N Range 11 W , NMPM, San Juan County	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS	
Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
La Mar Trucking, Inc.,	P.O. Box 1528, Farmington, New Mexico
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
INLAND CORPORATION PURCHASED ALL THE ASSETS OF BOTH La MAR TRUCKING, INC. AND INLAND CRUDE, INC. THIS PURCHASE INCLUDED N. 14 S. Sec. 11W	
If well produces oil or liquids, give location	Is gas actually connected? When

PERMIT # 670 WHICH HAS BEEN TRANSFERRED TO INLAND CORPORATION
If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA		Clyde C. LaMar, President	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Designate Type of Completion INLAND CORPORATION								
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
Pool	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
Perforations							Depth Casing Shoe	
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL		(Test must be after recovery of total volume of load oil and must be able for this depth or be for full 24 hours)	
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF



GAS WELL	
Actual Prod. Test-MCF/D	Length of Test
Testing Method (pitot, back pr.)	Tubing Pressure
	Casing Pressure
	Choke Size
	Bbls. Condensate/MMCF
	Gravity of Condensate

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.	
Original signed by: JOHN T. HAMPTON (Signature)	
Manager (Title)	
3-8-65 (Date)	

OIL CONSERVATION COMMISSION	
MAR 9 1965	
APPROVED _____, 19__	
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.	

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