NO. OF COPIES RECEIVED				
DISTRIBUTION	NEW MEXICO OIL	CONSERVATION COMMISSION	Form C -104	
SANTA FE		ST FOR ALLOWABLE	Supersedes Old C-104 and C-11	
FILE		AND	Effective I-1-85	
U.S.G.S.	AUTHORIZATION TO T	RANSPORT OIL AND NATURAL	GAS	
LAND OFFICE	_ <u>-</u> ! 			
TRANSPORTER - GAS /	<del>-</del>			
OPERATOR Z				
PRORATION OFFICE				
Spergion Maga Datasala				
Mesa Petrole	um Co.			
P.O. Box 200	9, Amarillo, TX 79	189		
Reason(s) for filing (Check proper bo)		Other (Please explain)		
New Well	Change in Transporter of:			
Recompletion  Change in Ownership	===	Gas X densate		
Change in Chancionis	GdsIngheda Gds	Tensare		
If change of ownership give name and address of previous owner				
I. DESCRIPTION OF WELL AND	LEASE		·	
Russell	i i	Name, including Formation rn Moundal PC	Kind of Lease   State, Federal or Fee   Federal	
Location				
Unit Letter N ; 5	00 Feet From The S	Line and 1688 Feet From	n The W	
Line of Section 33 , To	wnship 30N Range	14W , NMPM, San	Juan County	
A DEGLES ATTACK OF THE LIVER OF				
Name of Authorized Transporter of Ol	TER OF OIL AND NATURAL		roved copy of this form is (0 be sent)	
Name of Authorized Transporter of Co	singhead Gas or Dry Gas X	Address (Give address to which appr	roved copy of this form is to be sent)	
Mesa Petroleum Co.		P.O. Box 2009, Amarillo, TX 79189		
If well produces oil or liquids,	Unit Sec. Twp. Age.	Is gas actually connected? W	/hen	
give location of tanks.	·	Yes	August 24, 1954	
If this production is commingled w	ith that from any other lease or poo	ol, give commingling order number:		
COMPLETION DATA	Oil Well Gas Well	New Weil Workover Deepen	Plug Back Same Res'v. Diff. Res'v.	
Designate Type of Completi	on – (X)			
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
5/22/54	8/24/54 Name of Producing Formation	3512	1070	
Planco-Digturod Cl	iffs Pictured Clif	Top Cil/Gas Pay fs: 920	Tubing Depth	
Perforations	TITS PICCUIED CITT	15, 920	Depth Casing Shoe	
	TUBING, CASING, A	ND CEMENTING RECORD		
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
13 3/4	10 3/4	204	200	
7 7/8	5 1/2	1069	110	
. TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be	e after recovery of total volume of load of	il and must be equal to or exceed top allow-	
OIL WELL	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	Bbls. Condensate/MMCF	Committee of Committee or	
		EDIS. Condensate/MMCF	Gravity of Condensate	
813 Testing Method (pitot, back pr.)	24 Tubing Pressure	Casing Pressure	Choke Size	
Back Pressure	241		3/8	
I. CERTIFICATE OF COMPLIANCE		OIL CONSERV	OIL CONSERVATION COMMISSION	
- ·· — <b>- · ·</b>			1-1070	
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given		APPROVED		
Commission have been complied above is true and complete to the		f. BY Digital Digital of		
·			**************************************	
000	$\mathcal{O}$	TITLE		
( Dand ( Augus h		i i	This form is to be filed in compliance with RULE 1104.	
Sion	nature)	If this is a request for allowell, this form must be accome	owable for a newly drilled or deepened panied by a tabulation of the deviation	
	•	tests taken on the well in acc		

Staff Engineer

7/24/78 (Date)

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.

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