	NO. OF COPIES RECEIVED	12			
	DISTRIBUTION				
	SANTA FE	<del>/                                    </del>		NEV	N 1
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	U.S.G.S.		A 1 1 T		۸ ٦
	LAND OFFICE		AUT	HORIZ.	A
	OIL /				
	GAS /				
	OPERATOR 2				
1.	PRORATION OFFICE				
	Cperator McCullo	ch Oil	Corp	oratio	or
	Address				
	924 Vau	ighn Bu	ildin	g, Mi	<b>d</b> ]
	Reason(s) for filing (Check prop	er box)			
	New Well		Chang	e in Tran	sp
	Recompletion		Oil		
	Change in Ownership		Casin	ghead Ga	s
					_
	If change of ownership give n and address of previous owne	ame Con	mess	Expl.	,
	Lease Name  Federal  Location	L "A"			W
	Unit Letter;_	1140	Feet	From Th	e _
	Unit Letter A ;	1140 , Towns		From The	e
III.	Line of Section 26  DESIGNATION OF TRANS Name of Authorized Transporter	, Towns	R OF O	30N OIL ANI	<b>D</b> 1
III.	Line of Section 25  DESIGNATION OF TRANS  Name of Authorized Transporter	, Towns  SPORTE  of Cil  Truck	R OF O	30N OIL ANI OI Conder	D ]
III.	Line of Section 26  DESIGNATION OF TRANS  Name of Authorized Transporter  Name of Authorized Transporter	, Towns  SPORTE  of Cil   Truck  of Casine	R OF O	30N OIL ANI or Conder	D ]
Ш	Line of Section 26  DESIGNATION OF TRANS Name of Authorized Transporter Name of Authorized Transporter Souther	, Towns  SPORTE  For Of Cil Truck: For Of Casino	R OF O	30N OIL ANI OF Conder Coc.	D ]
III.	Line of Section 26  DESIGNATION OF TRANS  Name of Authorized Transporter  Name of Authorized Transporter	, Towns  SPORTE  For Of Cil Truck: For Of Casino	R OF O	30N OIL ANI OF Conder ONE.	D ] isc
	Line of Section 26  DESIGNATION OF TRANS Name of Authorized Transporter  La Mar  Name of Authorized Transporter  Souther  If well produces oil or liquids, give location of tanks.  If this production is comming	, Towns  SPORTE  of Cil   Truck  of Casino  run (mi	R OF O	OIL ANI OI Conder ONE. S. S. Cheriz Sec. 26	or The
	Line of Section 26  DESIGNATION OF TRANS Name of Authorized Transporter  Name of Authorized Transporter  Souther  If well produces oil or liquids, give location of tanks.  If this production is comming. COMPLETION DATA	, Towns  SPORTE  For of Cil   Truck: For Gasino	R OF O ing, I ghead Gar on Gat that from	30H DIL ANI DI Conder Conc. S S Sec. 26	or The
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## MEXICO OIL CONSERVATION COMMISSION

Form C-104

SANTA FE /	REQUEST	FOR ALLOWABLE AND	Supersedes Old C-104 and C-11 Effective 1-1-65			
FILE /						
LAND OFFICE	AUTHORIZATION TO TR	ANDFORT OIL AND NATORAL				
TRANSPORTER OIL /						
OPERATOR 2						
PRORATION OFFICE						
Operator McCulloch	Oil Corporation of Calif	fornia				
Address			· · · · · · · · · · · · · · · · · · ·			
	n Building, Midland, Text	Other (Please explain)				
Reason(s) for filing (Check proper b	Change in Transporter of:	Well-ness Charle	ed from Federal 2-26 to			
Recompletion	Oil Dry C	Gas Federal W 73	<sub>and</sub> , ye was 300 miles			
Change in Ownership	Casinghead Gas Cond	ensate Federal A 73				
If change of ownership give name	Compass Expl., Inc., Box	x 1138, Farmington, Nev	Nexico			
and address of previous owner						
I. DESCRIPTION OF WELL AN	D LEASE Well No. Pool N	Name, Including Formation	Kind of Lease			
Federal "	'A" 3 Bas:	in Dakota	State, Federal or Fee <b>Federal</b>			
Location	140 Forth Worth	ine and 990 Feet Fro	m The Bast			
Unit Letter;;	Feet From The	The und				
Line of Section 26	Township <b>301</b> Range	13W , NMPM,	San Juan County			
I DESIGNATION OF TRANSPO	ORTER OF OIL AND NATURAL G	GAS				
Name of Authorized Transporter of	Cil or Condensate X	Address (Give address to which app	oroved copy of this form is to be sent)  Lngton, Rev Mexico			
Name of Authorized Transporter of	Name of Authorized Transporter of Casinghead Gas or Dry Gas X		proved copy of this form is to be sent)			
	Union Gathering Co.		field, New Mexico			
If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected?  Yes	When <b>2-15-61</b>			
give location of tanks.	with that from any other lease or poo					
V. COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back   Same Res'v.   Diff. Res'v			
Designate Type of Comple		Now you				
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.			
D al	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth			
Pool						
Perforations	Perforations Depth Casing Shoe					
	TUBING, CASING, A	ND CEMENTING RECORD				
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT			
V. TEST DATA AND REQUEST	FOR ALLOWABLE (Test must be able for this	depth or be for full 24 hours)	oil 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, ga	s lift, etc.)			
Length of Test	Tubing Pressure	Casing Pressure	Choke Size			
Length of Test			OFITIVEN			
Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	Gas-MOF KLULIY LD			
			JAN 1 7 1966			
GAS WELL			Gravit Ollacon. COM.			
Actual Prod. Test-MCF/D	Length of Test	Bbis. Condensate/MMCF	DIST. 3			
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size			
		0:: 00::00	WATION COMMISSION			
VI. CERTIFICATE OF COMPLI	CERTIFICATE OF COMPLIANCE  I hereby certify that the rules and regulations of the Oil Conservation		RVATION COMMISSION			
I hereby certify that the rules a			7 1966 , 19			
Commission have been compli	ed with and that the information given the best of my knowledge and belie	ef. BY Original Sign	and France C Amold			
· · · - / / / / / / / / / / / / / / / /	10 1 CR		3165 # 5			
			in compliance with RULE 1104.			
- Carl	Miller	TO (1 to to a magning t for a	llowable for a newly drilled or deepend mpanied by a tabulation of the deviation			
	(Signature)	well, this form must be acco	ccordance with RULE 111.			

1-11-66

(Date)

well, this form must be accompanied by a tabulation of 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 owne well name or number, or transporter, or other such change of condition

Separate Forms C-104 must be filed for each pool in multip completed wells.