NO. OF COPIES RECEIVED		l copy - Conti	nental, Durango	
DISTRIBUTION	NEW MEXICO OIL CO'ISERVATION COMMISSION Form C-104			
SANTA FE	REQUEST FOR ALLOWABLE  Supersedes Old C-104 and C-110  Effective 1-1-65			
FILE /		AND		
U.S.G.S.	AUTHORIZATION TO TRA	NSPORT OIL AND NATURAL (		
LAND OFFICE OIL /	INLAND CORPORATION PURCHASED ALL THE ASSURE OF BOTH LOMAR TRUCKING, INC. AND INLAND  OF BOTH LOMAR TRUCKING, INC. AND INLAND			
TRANSPORTER GAS //		INC. THIS FURCHASE INC		
OPERATOR		PERMIT # 670 WHICH HA		
PRORATION OFFICE		INLAND CORPORATION.		
Operator		C	CLYDE C. LaMAR, PRESIDE	
Tenneco Oi.	l Company	11	HAND CORPORATION	
Address				
Reason(s) for filing (Check proper b	1714, Durango, Colorado 8	1301 Other (Please explain)		
New Well	Ox) Change in Transporter of:		Dakota and dualed.	
	Oil Dry Ga:	1 1 1	y to transport effective	
Recompletion Change in Ownership	Casinghead Gas Conden	, , , <del>, ,</del>	A co clamabole elledelae	
Oldinge in Ownership		IIIBO WELIVELY.		
If change of ownership give name	•			
and address of previous owner				
II. DESCRIPTION OF WELL AN	D LEASE			
Lease Na: 1e	Well No. Pool Nar	ne, Including Formation	Kind of Lease	
<u> Mansfield</u>	1	Basin Dakota	State, Federal or Fee Federal	
Location			A	
Unit Letter P;	400 Feet From The South Line	e and 350 Feet From	The <b>East</b>	
	- 14 <b>201</b>	** NIMITSMA	San Juan County	
Line o: Section 19 ,	Township 30N Range 9	, NMF <sup>3</sup> M,	San Juan County	
III DESIGNATION OF TRANSPO	RTER OF OIL AND NATURAL GA	s		
Name of Futhorized Transporter of	Oil or Condensate	Address (Give address to which appro	oved copy of this form is to be sent)	
Lemar Trucking, In	9	P. O. Box 1528, Farm	ington. New Mexico	
Name of Authorized Transporter of	Casinghead Gas or Dry Gas	P. O. Box 1528, Farm Address (Give address to which appro	oved copy of this form is to be sent)	
El Paso Natural Ga	s Commany	P. O. Box 990 Farmi Is gas actually connected? Wh	ngton. New Mexico	
If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected? Wh	en	
give location of tanks.	P 19 30 9	No	On approval	
If this production is commingled	with that from any other lease or pool,	give commingling order number:		
IV. COMPLETION DATA			Plug Back   Same Res'v.   Diff. Res'v.	
Designate Type of Comple	oil Well Gas Well	New Well Workove: Deepen		
	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
Date Spud-led			7321	
<b>10-1-65</b>	11-1-65  Name of Producing Formation	7352 Top Oil/Gas Pay	Tubing Depth	
6013 DF	Basin Dakota	7076	7012	
Perforations	Desin Demoye		Depth Casing Shoe	
<b>70</b> 76 <b>-</b> 73	16		7352	
		CEMENTING RECORD		
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
7-7/8	7" 23#	3250	425 ax 4 175 ax	
6-1/4	4-1/2" 10.5 & 11.6#	2999 - 7350 liner	400 sx cement	
			<u> </u>	
V. TEST DATA AND REQUEST	FOR ALLOWABLE (Test must be a able for this de	fter recovery of total volume of load oil opth or be for full 24 hours)	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 l	ift, etc	
			/ KTPTIAED /	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
			FEB 11 1966	
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF OIL CON. COM.	
			DIST. 3	
GAS WELL				
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
1686 Testing Method (pitot, back pr.)	3 hours Tubing Pressure	Casing Pressure	Choke Size	
			2/4	
Back Pr.	126	Packer	ATION COMMISSION	
VI. CERTIFICATE OF COMPLIA	ANCE			
I hereby certify that the rules and regulations of the Oil Conservation		APPROVED	, 19	
Commission have been complied with and that the information given				
above is true and complete to	the best of my knowledge and belief.	BY		
		TITLE PETROLEUM I	INCINEER DIST. NO. 3	
Llace 10	2 Secholo			
oranoux (	- Harring		compliance with RULE 1104. wable for a newly drilled or deepened	
/S	ignature)	well, this form must be accomp	anied by a tabulation of the deviation	
Senior Production Clerk		tests taken on the well in accordance with RULE 111.		
(Title)		All sections of this form must be filled out completely for allowable on new and recompleted wells.		
February 9, 1966		able on new and recompleted wells.  Fill out Sections I, II, III, and VI only for changes of owner,		
	(Date)		well name or number, or transporter, or other such change of condition.	
			st be filed for each pool in multiply	
		completed wells.		