| | | | | | 7 | | |
|---|------------------------------|--|--|---|---|---------------------------------------|--|
| NO. OF COPIES RECEIVED | | | | | | | |
| DISTRIBUTION / | NEW! | NEW MEXICO OIL CONSERV | | | Form C-104 Supersedes Old | C-104 and C-11 | |
| FILE / | | REQUEST FOR ALL AND | | | Effective 1-1-65 | | |
| U.S.G.S. | AUTHORIZAT | TION TO TRA | NSPORT | OIL AND NATURAL | _ GAS | | |
| LAND OFFICE | | | | | ON PURCHASED ALL THE | | |
| TRANSPORTER GAS | | | | | ICKING, INC. AND INLAI INCLUDED N. M. S. C. | | |
| OPERATOR / | | | 1 | NC. THIS PURCHASE | H HAS DEEN TRANSFERRI | ED TO | |
| I. PRORATION OFFICE | | | | NLAND CORPORATIO | | | |
| Cperator Tennece 0il | Company | | • | , . . | CLYDE C. LaMAR, P | | |
| Address | . Company | | | | INLAND CORPORATI | ON | |
| | 714, Durange, Ce | lorado | | | | | |
| Reason(s) for filing (Check proper New Well | | Change in Transporter of: | | | Other (Please explain) For Record Purposes Only | | |
| Recompletion | Oil [| | | Designation of condensate only | transporter of | ensperter er | |
| Change in Ownership | Casinghead Gas | Conder | | Cautamere aut) | <i>,</i> | | |
| Isologna se fra vo osti osi se ce o | e r | | | | | | |
| And tagine to propose and an appropriate | Southern Union | Cathering | s owns t | ank battery and | i handles sale of | liquids. | |
| II. DESCRIPTION OF WELL AN | | | | | | | |
| Lease Name | W | Well No. Pool Na | | g Formation | Kind of Lease State, Federal or Fee | | |
| Location | | 2 Blar | ico Ness | verde | olato, i dastal oi i da | Federal | |
| Unit Letter 🛕 ; | 990 Feet From The_ | ₩ Lin | ie and | OOO Feet Fro | om The | | |
| , | | | | | | | |
| Line of Section 20 , | Township 30 | Range | 9 | , NMPM, | San Juan | County | |
| I. DESIGNATION OF TRANSPO | ORTER OF OIL AND N | NATURAL GA | ıs | | | | |
| Name of Authorized Transporter of Oil or Condensate | | | Address (| - | proved copy of this form is to | | |
| Name of Authorized Transporter of Casinghead Gas or Dry Gas | | | P. O. Bex 1528, Farmington, New Mexico Address (Give address to which approved copy of this form is to be sent) | | | be sent) | |
| Southern Union Cather | | X, Guo X | | ty Union Tower. | | , | |
| If well produces oil or liquids, | | wp. Rge. | | ually connected? | When | · · · · · · · · · · · · · · · · · · · | |
| give location of tanks. | A 20 | 30 9 | Yes | | *** | | |
| If this production is commingled V. COMPLETION DATA | with that from any other | lease or pool, | give comm | ingling order number: | | | |
| | Oil Well | Gas Well | New Well | Workover Deepen | Plug Back Same Res | v. Diff. Resiv. | |
| Designate Type of Comple | | 1 1 | Total Dep | 1 | P.B.T.D. | I I. | |
| Date Spudded | Date Compl. Ready to | Prod. | Total Dep | 111 | F.B.1.D. | | |
| Pool | Name of Producing Fo | Name of Producing Formation To | | Gas Pay | Tubing Depth | | |
| | | | | | | David Contra Chan | |
| Perforations | | | | | Depth Casing Shoe | | |
| | TUBING | , CASING, ANI | D CEMENT | ING RECORD | | | |
| HOLE SIZE | CASING & TUE | | | DEPTH SET | SACKS CEM | ENT | |
| | | | | · | | | |
| | | | | | | | |
| | | | | | | | |
| V. TEST DATA AND REQUEST | FOR ALLOWABLE | | | | oil and must be equal to or e | xceed top allow | |
| OIL WELL Date First New Oil Run To Tanks | Date of Test | able for this de | | r full 24 hours) Method (Flow, pump, ga | s lift, etc.) | | |
| Date First New Off Rull 10 Tunks | Date of Test | | , 104451119 | (Compared to combine to the combine | OFI.TIV | F/V | |
| Length of Test | Tubing Pressure | | Casing Pr | essure | Choke Sile | FD / | |
| | | THE PART OF THE PA | | Gal-MCMAY 5 1 | 965 | | |
| Actual Prod. During Test | Oil-Bbls. | | Water-Bb | 18. | Gdd - MCP | 1 | |
| | | | | | OIL CON. | | |
| GAS WELL | | | -, | | | | |
| Actual Prod. Test-MCF/D | Length of Test | _ength of Test | | densate/MMCF | Gravity of Condensate | Gravity of Condensate | |
| Testing Method (pitot, back pr.) | Tubing Pressure | | Casing Pr | essure | Choke Size | | |
| resting method (proce, ouch pr.) | Tabling Flessure | | Caping Pi | | Silva Silva | | |
| /I. CERTIFICATE OF COMPLI | ANCE | | | OIL CONSER | VATION COMMISSION | <u></u> | |
| | TO CENTIFICATE OF COMPLIANCE | | | | | | |
| | | | 1 | 88AV # 10i | ፍ ፍ | | |
| I hereby certify that the rules a Commission have been complied | nd regulations of the Oil | Conservation | | V LU _IIIII V | Emery C. Arnold | 19 | |

Original Signed By:

J. H. WATKINS

District Office Supervisor

April 30, 1965

(Signature)

(Date)

TITLE Supervisor Last 3 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.