with the second			
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SANTA FE /		ONSERVATION COMMISSION	Form C-104 Supersedes Old C-104 and C-
	REQUEST I	FOR ALLOWABLE	Effective 1-1-65
FILE /		AND	
U.S.G.S.	AUTHORIZATION TO TRA	NSPORT OIL AND NATURAL (	GAS
LAND OFFICE			" COK," CO,
IRANSPORTER OIL			CLEUM CLEUM
GAS		o'	ETRUL PETRO1913
OPERATOR /		,,co t	MESI AY 1,
PRORATION OFFICE		BUDGINT	ETROLEUM CORP. CO.  ETROLEUM CORP. CO.  O MESA PETROLEUM  O MESA PETROLUM  O MESA PETROL
Operator		WE GOD EN	
Pubco Petroleum Corpor	ation	, ,	· · · · · · · · · · · · · · · · · · ·
Address			
P. O. Box 1419, Albuqu	erque, New Mexico 87103		
Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well	Change in Transporter of:	Change in name	from State #17
Recompletion	Oil Dry Ga		
Change in Ownership	Casinghead Gas Conden	sate	
If change of ownership give name and address of previous owner			
DESCRIPTION OF WELL AND I	LEASE		
Lease Name	Lease No. Well No. Pool Na	me, Including Formation	Kind of Lease
State Com U	17 Azte	c Pictured Cliffs	State, Federal or Fee State
Location	and the second s		
т 1450	Feet From The S Lin	g and OQA Feet From	The E
Onit Letter	The second secon		
Line of Section 16 Tow.	nship 30N Range	11W , NMFM, San	Juan County
Name of Authorized Transporter of Oil	or Condensate	Address (Give address to which appr	oved copy of this form is to be sent)
Name of Authorized Transporter of Cas.	inghead Gas or Dry Gas 🔀	Address (Give address to which appr	oved copy of this form is to be sent)
El Paso Natural Gas Co	ompany	P. O. Box 1492, E1	Paso, Texas 79999
	Unit Sec. Twp. Rge.	Is gas actually connected? W	hen
If well produces oil or liquids, give location of tanks.	I 16 30N 11W	Yes	
If this production is commingled with COMPLETION DATA	<del></del>	give commingling order number:	
	Oil Well Gas Well	New Well Workover Deepen	Plug Back   Same Restv. Diff. Res
Designate Type of Completio	n - (X)		1
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
, , , , , , , , , , , , , , , , , , , ,			
Perforations		A CONTRACTOR OF THE PROPERTY O	Depth Casing Shoe
· Oriorations			
	THRING CASING AND	D CEMENTING RECORD	
		DEPTH SET	SACKS CEMENT
HOLE SIZE	CASING & TUBING SIZE	DET THI SE.I	
	<u> </u>		
. TEST DATA AND REQUEST FO	OR ALLOWABLE (Test must be o	after recovery of total volume of load o	il and must be equal to or exceed top all
OIL WELL	able for this a	epth or be for full 24 hours)	lift ato.)
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas	esse, esc.,
			Chala Cra
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
	·		
Actual Prod. During Test	Oil-Bbls.	Water-Bbis.	Gas-MCF
· 1			
1			050.2 1000
GAS WELL			Gravity of Coldana COM
1 1 /3 /3 TI C. I. I.			

VI. CERTIFICATE OF COMPLIANCE

Testing Method (pitot, back pr.)

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.

Area Production Manager

November 29, 1965

Tubing Pressure

OIL CONSERVATION COMMISSION

Choke Size

APPROVED <u>EC 2 1965</u>	, 19
BY A R. KENDKICK	
PETROLEUM ENG	INEER DIST. NO. 3

Cosing Pressure

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 raken on the well in accordance with RULE 111.

 $|{\rm All}|$  sections of this form must be filled out completely for allowable of new and recompleted wells.

Prince on the time 1 %. III, and VI for changes of owner, well name or times in ransporter, or other such change of condition.

Legislation of the condition of

