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	SANTA FE				
	FILE		/		
	U.S.G.S.				
	LAND OFFICE		L_		
	TRANSPORTER	OIL	\coprod		
į	RANSPORTER	GAS			
	OPERATOR		1		
	PRORATION OFFICE				
•	Operator Lynco Oil Corporat				

3/24/80

(Date)

	DISTRIBUTION SANTA FE /	REQUEST	CONSERVATION COMMISSION FOR ALLOWABLE AND	Form C-104 Superzedes Old C-104 and C-116 Effective 1-1-65				
	U.S.G.S. LAND OFFICE IRANSPORTER OIL / GAS / OPERATOR /	_ AUTHORIZATION TO TRA	ANSPORT OIL AND NATURAL G	AS .				
1.	PRORATION OFFICE			·				
	Lynco Oil Corporat	ion						
	Address 5290 DTC Parkway, Bldg. #2 Englewood, Colorado 80111							
	Reason(s) for filing (Check proper box) Other (Please explain)							
	New Well Recompletion	Change in Transporter of: Oil X Dry Ga	ıs 🔲					
	Change in Ownership							
	If change of ownership give name and address of previous owner							
11.	DESCRIPTION OF WELL AND	LEASE	ormation Kind of Lease	Legse No.				
	Lease Name	Well No. Pool Name, including Fo	Carre Cadasal	or Fee Federal SF-079070A				
Dick Hunt Federal 2 Sacra Sacra Location								
	Unit Letter H ; 2	150 Feet From The North Lin	e and 940 Feet From T	he <u>East</u>				
	Line of Section 1 To	wnship 30N Range	14W , NMPM, San	Juan County				
111.	DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL GA	AS Address (Give address to which approv	ed copy of this form is to be sent)				
	Permian Corporation	n	P.O. Box 1183 Houston, Address (Give address to which approv	Texas 77001				
	Name of Authorized Transporter of Ca El Paso Natural Ga		P. O. Box 1492 El Paso	1				
	If well produces oil or liquids,	Unit Sec. Twp. P.ge.	Is gas actually connected? Whe	n				
	give location of tanks.	H 1 30N 14W	<u> </u>	February 18, 1965				
IV.	If this production is commingled with COMPLETION DATA.	ith that from any other lease or pool,	New Well Workover Deepen	Plug Back Same Resty. Diff. Resty.				
	Designate Type of Completi	on - (X)	I HOLEGAST DESPEN					
	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			Depth Casing Shoe				
		TUBING, CASING, AND CEMENTING RECORD						
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT				
		TOP AT LOWARIE (Test must be a	fter recovery of total volume of load oil o epth or be for full 24 hours)	and must be equal to or exceed top allow-				
V.	TEST DATA AND REQUEST FOIL WELL	MATTINE						
	Date First New Oil Run To Tanks	Date of Test						
	Length of Test	Tubing Pressure	Casing Pressure					
	Actual Prod. During Test	Oil-Bbls.	Water-Bble.	MAR 3°1 1980				
			10	IL CON. COM.				
	GAS WELL		Bbis. Condensate/MMCF	DIST. 3				
	Actual Prod. Test-MCF/D	Length of Test						
	Testing Method (pitot, back pr.)	Tubing Pressure (Shat-ia)	Casing Pressure (Shut-im)	Choke Size				
VI.	CERTIFICATE OF COMPLIANCE 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.		MAR 3 1	1980				
			AFFROVED					
	above is true and complete to th	C 2001 U. M.	TITLE SUPERVISOR DISTRICT # 3					
/	<u> </u>	//	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 taken on the well in accordance with RULE 111.					
	James Th. K	ay						
	Field Manager	nature						
(Title)			All sections of this form must be filled out completely for allowable on new and recompleted wells.					

Fill out only Sections I. II, III, and VI 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.