NO. OF COPIES RECEIVED			15	
DISTRIBUTION				
SANTA FE		7		
FILE		7	_	
U.S.G.S.		1		
LAND OFFICE				
TRANSPORTER	OIL	171		
	GAS			
OPERATOR		121		
PPORATION OFFICE		1		
Operator				

1.	DISTRIBUTION SANTA FE FILE U.S.G.S. LAND OFFICE TRANSPORTER OPERATOR PRORATION OFFICE OPERATOR PRORATION OFFICE OPERATOR PRORATION OFFICE NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE Supersedes Old C-104 and Effective 1-1-65 AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS OPERATOR OPERATOR OPERATOR OPERATOR					
	Clinton Oil Company Address P. O. Box 2434 Records for filing (Check proper box New Well Recompletion Change in Ownership	Change in Transporter of: Oil X try G Casinghead Gas 70, le	i=	un)		
	If change of ownership give name and address of previous owner					
H.	Lease Name	Well Mo. E cliffame, hal die 6	54.74	of Lease	NM Lease No.	
	Northeast Hogback	21 Horseshoe (Federal or Fee Federal	04443	
	1.5	Month 10 Feet From The North Common North Co		an Juan	County	
11.	DESIGNATION OF TRANSPOR Name of Authorized Transporter of Cit Ciant Refining, Inc. Name of Authorized Transporter of Cast		Address (Give address to which Farmington NM 87 Address (Give address to which	401		
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Pge.	is gas actually connected?	When	·	
	If this production is commingled with	P 10 30N 16W th that from any other lease or pool,	No give commingling order numb	er:		
₩.	Designate Type of Completic	Cit Well Ggs Well	Clew Well Workover Dec	pen Flug Back Same	Restv. Diff. Restv	
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	<u> </u>	
	Elevations (DE, RKR, RI, GR, etc.,	Name of Freducing Cormation	Tej - 9. Sas Pay	Tuking Depth		
	Perforations		1	Depth Casing Shoe		
	HOLE SIZE	TUBING, CASING, AND CASING & TUBING SIZE	DEPTH SET	SACKS	EMENT	
v.	TEST DATA AND REQUEST FO	OR ALLOWABLE (Test must be a	fter recovery of total volume of i	load oil and must be equal to	or exceed top allou	
	Oll. WFI L. Date First New Oil Hun To Tanks		pth or be for full 24 hours) Producing Method (Flow, pump			
					10	
	Length of Test	Tubing Pressure	Casing Pressure	Cycke Size		
	Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	OIL CO		
	GAS WELL			DIST		
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Gendens	ett	
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size		
VI. CERTIFICATE OF COMPLIANCE			ERVATION COMMISS	1 2 1974		
I hereby certify that the rules and regulations of the Oil Conservation Commission have been compiled with and that the information given above is true and complete to the best of my knowledge and belief. Duane L. Kihle, District Production Clerk (Title)			Original Signed by Emery 8. Arnold			
			TITLE SUPERVISOR DIST, #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 allow able 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			
,	(Da	(e)	well name or number, or tr Separate Forms C-10 completed wells.	ansporter, or other such ch 04 must be filed for each	ange of condition pool in multiply	