NO. OF COPIES REC	5					
DISTRIBUTIO						
SANTA FE	1	Ţ				
FILE	17	1				
U.S.G.S.	i					
LAND OFFICE	Γ					
IRANSPORTER	OIL					
	GAS					
OPERATOR		2				
PRORATION OF						
Operator						
Clinton Oil Company						
Address						

1.	SANTA FE FILE U.S.G.S. LAND OFFICE TRANSPORTER GAS OPERATOR PRORATION OFFICE	FOR ALLOW	N COMMISSION /ABLE L AND NATURAL	Superse Effectiv	Form C-104 Supersedes Old C-104 and C-1 Effective 1-1-65					
	Clinton Oil Company									
	Address									
	P. O. Box 2434 Reason(s) for filing (Check proper box)		Othe	et (Please explain)					
	New We!! Recompletion	Change in 1	Transporter of: X Dry G	as 🗀						
	Change in Ownership	Casinghead	\equiv							
	If change of ownership give name and address of previous owner									
II.	DESCRIPTION OF WELL AND		col Name, Includent	tration	Kind of Le	156	NM Lease No.			
	Northeast Hogback	36	Horseshoe			ral or Fee Feder	-			
	Location	:n		•		W 4				
			The South :							
	Line of Section 10 Tow	wnship 30N	Hange 16	<u>W</u>	, NMEM, San Ji	ıan	County			
III.	DESIGNATION OF TRANSPORT	TER OF OIL A	ND NATURAL GA							
	Name of Authorized Transporter of CII Giant Refining Inc	x or Con	densate [_]		address to which app	roved copy of this f	orm is to be sent)			
	Liane or Authorized Transporter of Cas	Giant Refining, Inc. Name of Authorized Transporter of Castnahead Gas or Dry Gas			ton NM 87401 address to which app	roved copy of this fo	orm is to be sent)			
		Unit Sec. Twp. Pge.			y connected?	Vhen				
	If well produces oil or liquids, give location of tanks.	P 10		No						
**,	If this production is commingled wit	th that from any	other lease or pool,	give commingl	ing order number:					
3 V .	Decision to Tune of Completion		Well Gas Well	Thew Well V	Yorkover Deepen	Plug Back Sa	me Resty. Diff. Resty			
	Designate Type of Completion Date Spidded	Date Compl. Rec	rdy to Prod.	Total Derth		P.B.T.D.				
	Elevations (DF, RKB, RT, GR, etc.)	Name of Product	ing Formation	Tep/ 1. Jas [şαλ	Tubing Depth				
	Perforations			1		Depth Casing S	hoe			
		T11	BING, CASING, AN	D CEMENTING	PECOPO					
	HOLE SIZE		TUBING SIZE	T	EPTH SET	SACK	SCEMENT			
				 						
T ,	TECT DAMA AND DECUEST EA	DD ALLOWAR	I.E. (Taxable)							
٧.	TEST DATA AND REQUEST FOOIL WELL		able for this de	epth or be for ful	l 24 hours)		to or exceed top allou			
	Date First New Oil Run To Tanks	Date of Test		Producing Met	hod (Flow, pump, gas	lift, etc./				
	Length of Test	Tubing Pressure		Casing Pressu	r.e	Choke Size	· · · · · · · · · · · · · · · · · · ·			
	Actual Prod. During Test	Oil-Bble.		Water-Bbls.		Gas - MCF				
		<u> </u>		<u> </u>						
	GAS WELL				****					
	Actual Prod. Test-MCF/D	Length of Test		Bbls. Condens	ate/MMCF	Gravity of Cond	ensate			
	Testing Method (pitot, back pr.)	Tubing Pressure	(Shut-in)	Casing Pressu	re (Shut-in)	Choke Size				
vi	CERTIFICATE OF COMPLIANCE	· F			OIL CONSERV	ATION COMMI	SBEC 1 3 1974			
v 1.	CERTIFICATE OF COMPLIANC	J.E.								
	Commission have been complied w	y that the rules and regulations of the Oil Conservation we been complied with and that the information given			APPROVED, 19					
	above is true and complete to the	best of my kno	owledge and belief.	By Orig	By Original Signed by Emery C. Arnold SUPERVISOR DIST. #3					
	\wedge	1		H						
	Duane J. Khlo (Signature)				This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepend well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.					
	Duane L. Kihle, Distric	on Clerk	All sections of this form must be filled out completely for allow able on new and recompleted wells.							
	12- 10-74	10-74				II. III. and VI fo	r changes of owner change of condition			
	(Da	te)			or number, or transporter, or other such change or condition ite Forms C-104 must be filed for each pool in multiply					