DISTRIBUTION BANTAFE FILE

OIL CONSERVATION DIVISION

P. O. UOX 2088 SANTA FE, NEW MEXICO 87501

	TRANSPORTER OIL OPERATOR AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS						
1.	PROBATION OFFICE CONTRACTOR TO TRANSPORT OIL AND NATURAL GAS						
	SIERRA OIL AND GAS COMPANY						
	1444 Wazee Street, Suite 340 Denver, Colorado 80202						
	Reason(s) for filing (Check proper b						
	Recompletion Change in Ownership X	s					
	If change of ownership give name and address of previous owner	Sumatra Energy Company,	Inc. 999 18th St	reet, Su	ite 1400 Denve	r CO 80202	
II.	DESCRIPTION OF WELL AND	ormation Kind of Lease			1		
	Malco Copple A	1 Verde Gallup		State Federa		080212A	
	Unit Letter C; 6	60 Feet From The N	ne and 1980	_ Feet From 1	The W		
	Line of Section 4 T	ownship 30 North Range 15	West , NMPM,	San Ju	an	County	
II.	DESIGNATION OF TRANSPOL		Address (Give address to which approved copy of this form is to be sent)				
	In land Con		11	<i>-</i>			
	Name of Authorized Transporter of C	asinghead Gas or Dry Gas	Address (Give address in	o which approv	ved copy of this form is	to be sent)	
	If well produces oil or liquids, que location of tanks. Unit Sec. Twp. Fige. Is gas actually connected? When 1C 4 30N 15W						
	If this production is commingled w COMPLETION DATA	rith that from any other lease or pool,	give commingling order	number:			
	Designate Type of Complete	ion — (X) Oil Well Gas Well XX	New Well Workover	Deepen i	Plug Back Same Res	s'v. Diff. Res'v.	
	Date Spudded	Date Compl. Ready to Prod.	Total Depth		P.B.T.D.		
	August 21, 1959 Elevations (DF. RKB, RT, GR, etc.)	September 29, 1959	3,726'		Tubing Depth		
	G. L. 5445	Lower Gallup			3,716'		
	Perforations Depth Casing Shoe						
Ì		TUBING, CASING, AN	CEMENTING RECORE		·		
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SE	т	SACKS CEN	AENT .	
}		5½"	3612'		250		
-		10-3/4"	122'		125		
ŀ		2-3/8"	164' 3716'				
		OR ALLOWABLE (Test must be a	*		!	exceed top allow-	
Ī	able for this depth or be for full 24 hours) ate First New Oil Run To Tanks Date of Test Producing Method (Flow, pump, gas lift, etc.)						
}	Length of Teet	Tubing Pressure Casing Pressure			Choke Size		
Ī	Actual Prod. During Test	Oil-Bbls.	Water-Bbls.		Gas-MCF		
'-							
ſ	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF		Gravity of Condensate		
-	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Cosing Pressure (Shut-1	n)	Choke Size	<u> </u>	
լ. լ. Ր	CERTIFICATE OF COMPLIAN	CE	טוו רח	NSFRVATI	ON DIVISION		
			APPROVED JUN 1984				
I	hereby certify that the rules and	APPROVED 1007 19					
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.			BY				
		TITLE SUPERVISOR DISTRICT 35 3					
4	IVAL DADILLAND	This form is to be filed in compliance with RULE 1104.					
/_	WM) I / BANTA	If this is a reque	at for allowa	ble for a newly drille	d or deepened		
(Sarah P. Speicher Age	well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.					
~	(Title) June 4, 1984, effective as of 1/1/84		All sections of this form must be filled out completely for allowable on new and recompleted wells.				
	(Date)		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