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U.S.G.S.  LAND OFFICE  IRANSPORTER OIL  GAS  OPERATOR  PROGRATION OFFICE  Certator  West Gas, Inc.  Address  604 W. Pinon Farmington, N.M. 87401  Recognis) for filing (Check proper box)  New Well  Change in Transporter of Costinghead Gas Condensate  If change of ownership give name R.A. Crane Jr. 2205 E. Main Farmington, N.M. 87  DESCRIPTION OF WELL AND LEASE  Lease Name  Shiprock  Shiprock  Shiprock  Shiprock  B Shiprock Gallup North  State, Federal of Fee 14-20-06  Location  Unit Letter I : 2310 Feet From The S Line and 660 Feet From The E  Line of Section 14 Township 30N Range 18W NNFM, San Juan  DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  Nore of Authorized Transporter of Oil or Condensate Address to which approved copy of this form is in the conduction of transporter of Castinghead Gas or Dry Gas Address (Give address to which approved copy of this form is in the conduction of transporter of Castinghead Gas or Dry Gas Address (Give address to which approved copy of this form is in the conduction of transporter of Castinghead Gas or Dry Gas Address (Give address to which approved copy of this form is in the conduction of transporter of Castinghead Gas or Dry Gas Address (Give address to which approved copy of this form is in the conduction of transporter of Castinghead Gas or Dry Gas Address (Give address to which approved copy of this form is in the conduction of transporter of Castinghead Gas or Dry Gas Address (Give address to which approved copy of this form is in the conduction of transporter of Castinghead Gas or Dry Gas Address (Give address to which approved copy of this form is in the conduction of transporter of Castinghead Gas or Dry Gas Address (Give address to which approved copy of this form is in the conduction of transporter of Castinghead Gas or Dry Gas Address (Give address to which approved copy of this form is in the conduction of transporter of Castinghead Gas or Dry Gas Address	Lease No. 03-8492 County		
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS  LAND OFFICE  IRANSPORTER OIL   GAS    OPERATOR   PROBATION OFFICE    The proper box;  West Gas, Inc.  Address 604 W. Pinon Farmington, N.M. 87401  Recognition of filing ((heck proper box))  New Well   Change in Transporter office    Change in Transporter office    Condensatie   Craim of ownership give name   Casinghead Gas   Condensatie    If change of ownership give name   R.A. Crane Jr. 2205 E. Main Farmington, N.M. 87  DESCRIPTION OF WELL AND LEASE    Lease Name   Well No., Pool Name, Including Formation   State, Federal of Fee 14-20-06  Location   Unit Letter I   2310   Feet From The   S   Line and   660   Feet From The   E    Line of Section 14   Township   30N   Bange   18W   NNEM, San Juan  DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  Note of Authorized Transporter of CI   Or Condensate   Address (Give address to which approved copy of this form is in the condensate   Address (Give address to which approved copy of this form is in the condensate   Address (Give address to which approved copy of this form is in the condensate   Address (Give address to which approved copy of this form is in the condensate   Address (Give address to which approved copy of this form is in the condensate   Address (Give address to which approved copy of this form is in the condensate   Address (Give address to which approved copy of this form is in the condensate   Address (Give address to which approved copy of this form is in the condensate   Address (Give address to which approved copy of this form is in the condensate   Address (Give address to which approved copy of this form is in the condensate   Address (Give address to which approved copy of this form is in the condensate   Address (Give address to which approved copy of this form is in the condensate   Address (Give address to which approved copy of this form is in the condensate   Address (Give address to which approved copy of this form is in the condensate   Address (Give address to which approved copy of thi	Lease No. 03-3492 County		
IRANSPORTER OIL / GAS OPERATOR OFFICE OF GAS OPERATOR OFFICE OF GAS OPERATOR OFFICE OF	Lease No. 03-8492 County		
OPERATOR  PROBATION OFFICE  Coperator  West Gas, Inc.  Address  604 W. Pinon Farmington, N.M. 87401  Recoon(s) for filing (Check proper box)  New We!! Change in Transporter of:  Change of Condensate Change of Ownership give name  In change of ownership give name  R.A. Crane Jr. 2205 E. Main Farmington, N.M. 87  DESCRIPTION OF WELL AND LEASE  Lease Name  Shiprock	Lease No. 03-8492 County		
PROBATION OFFICE   PROBATION OFFICE   PROBATION OFFICE	Lease No. 03-8492 County		
West Gas, Inc.  Address  604 W. Pinon Farmington, N.M. 87401  Recon(s) for filing (Check proper box)  New We!! Change in Transporter of: Oil Dry Gas Change of ownership give name R.A. Crane Jr. 2205 E. Main Farmington, N.M. 87  DESCRIPTION OF WELL AND LEASE Lease Name Shiprock  Shiprock  Shiprock  Shiprock  Shiprock  Shiprock  Shiprock  Casinghead Gas  Shiprock Gallup North  State, Federal or Fee 14-20-06  Location  Unit Letter  I : 2310 Feet From The S Line and 660 Feet From The E  Line of Section 14 Township 30N Range 18W NAMEM, San Juan  DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  Name of Authorized Transporter of Cli or Condensate  Name of Authorized Transporter of Casinghead Gas or Dry Gas  Address (Give address to which approved copy of this form is in the content of Authorized Transporter of Casinghead Gas or Dry Gas  Name of Authorized Transporter of Casinghead Gas or Dry Gas  Name of Authorized Transporter of Casinghead Gas or Dry Gas  Name of Authorized Transporter of Casinghead Gas or Dry Gas  If well produces oil or liquids, give location of tarks.	Lease No. 03-8492 County		
West Gas, Inc.  Address  604 W. Pinon Farmington, N.M. 87401  Reason(s) for filing (Check proper box;  New Well Change in Transporter of:  Recompletion	Lease No. 03-8492 County		
Address 604 W. Pinon Farmington, N.M. 87401  Reason(s) for filing (Check proper box)  New Well Change in Transporter of:  Recompletion Oil Dry Gas Change of ownership give name R.A. Crane Jr. 2205 E. Main Farmington, N.M. 87  DESCRIPTION OF WELL AND LEASE  Lease Name Well No. Fool Name, including Formation Shiprock 8 Shiprock Gallup North State, Federal or Fee 14-20-06  Location Unit Letter I ; 2310 Feet From The S Line and 660 Feet From The E  Line of Section 14 Township 30N Range 18W NEW, San Juan  DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  Name of Authorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form is in the content of Authorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form is in the content of Authorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form is in the content of Authorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form is in the content of Authorized Transporter of Casinghead Gas or Dry Gas Spin actually connected? When	Lease No. 03-8492 County		
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Change in Transporter of: Oil	Lease No. 03-8492 County		
Change of ownership give name R.A. Crane Jr. 2205 E. Main Farmington, N.M. 87  DESCRIPTION OF WELL AND LEASE.  Lease Name Well No. Pool Name, Including Formation  Shiprock 8 Shiprock Gallup North State, Federal or Fee 14-20-06  Location  Unit Letter I : 2310 Feet From The S Line and 660 Feet From The E  Line of Section 14 Township 30N Range 18W , NMFM, San Juan  DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  Name of Authorized Transporter of Cili or Condensate Address to which approved copy of this form is a condensate of Authorized Transporter of Casinghead Gas or Dry Gas Address to which approved copy of this form is a condensate of Authorized Transporter of Casinghead Gas or Dry Gas Address to which approved copy of this form is a condensate of Authorized Transporter of Casinghead Gas or Dry Gas Address to which approved copy of this form is a condensate of Casinghead Gas or Dry Gas Address to which approved copy of this form is a condensate of Casinghead Gas or Dry Gas Address to which approved copy of this form is a condensate or Casinghead Gas or Dry Gas Address to which approved copy of this form is a condensate or Casinghead Gas or Dry Gas Address to which approved copy of this form is a condensate or Casinghead Gas or Dry Gas Address to which approved copy of this form is a condensate or Casinghead Gas or Dry Gas Address to which approved copy of this form is a condensate or Casinghead Gas or Dry Gas actually connected?  If well produces oil or liquids, give location of tanks.	Lease No. 03-8492 County		
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Date Spudded Date Compl. Ready to Prod. Total Depth P.B.T.D.			
Elevations (2F, RKB, RT, GR, etc.) Name of Producing Formation. Top Cti/Gas Pay Tubing Depth			
Perforations Depth Casing Shoe			
TURNING CALING AND CENTRAL THE RECORD			
TUBING, CASING, AND CEMENTING RECORD  HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEN	MENT		
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TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or able for this depth or be for full 24 hours)	exceed top allow		
Zate First New Oil Run To Tanks Date of Test Producing Method (Flow, pump, gas lift, etc.)	·		
Length of Test  Tubing Pressure  Casing Pressure			
Actual Prod. During Test Oil-Bbls. Water-Bbls.			
~ 0 1074			
GAS WELL 357 2 7 1974			
Ac wall Frod. Test-MCF/D  Length of Test  Bbls. Condensate/MMC:  OIL. COIN. COM-	,		
Testing Method (pitot, back pr.) Tubing Pressure (Shut-in) Cosing Pressure (Shut-in)			
CERTIFICATE OF COMPLIANCE OIL CONSERVATION COMMISSION	N		
	1974		
nereby certify that the rules and regulations of the Oil Conservation	. 19		
Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.			
SUPERVISOR DIST.	# <b>3</b>		
· I	TITLE		
This form is to be filed in compliance with RUL  If this is a request for allowable for a newly dril	led or deepened		
(Signature)  well, this form must be accompanied by a tabulation	of the deviation		
All sections of this form must be filled out compl	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 warms	•		
9 /26 /79  Fill out only Sections I. II. III. and VI for change of number, or transporter, or other such changes of the such c			
Separate Forms C-104 must be filed for each ;	inges of owner ge of condition		
completed wells.	ige of condition		