				[
	DISTRIBUTION		l				
	ANTA FE	2	CONSERVATION COMMISSION				
	FILE	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 Effective 1-1-65	and C-11		
	J.S.G.S.		AND				
	LAND OFFICE	AUTHORIZATION TO TRA	ANSPORT OIL AND NATU	RAL GAS			
	OIL /						
	TRANSPORTER GAS /						
	OPERATOR /						
1.	PRORATION OFFICE						
	Operator						
	1417 1 NT 1817 ET	THE REAL PROPERTY.					
	Address						
	100000	lar in ton, Residuico					
	Reason(s) for filing (Check proper bo		Other (Please explai	(n)			
	New Well	Change in Transporter of:					
	Recompletion	Oil Dry Go					
	Change in Ownership	Castaghead Gas Conde	nsate				
	If change of ownership give name						
	and address of previous owner						
••	PERCENTAGE OF WELL AND	www.a.com					
11.	DESCRIPTION OF WELL AND	Well No. Pool Name, I cluding F	ormation Kind o	of Lease	se No.		
	Nordhaud	1-4 Plance Pepav		Federal or Fee Paristra!			
	Location	Jan Danie	7-1-1-20-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	7973	250o		
		t i handi	1108	· Secret			
	Unit Letter ; 10	(A) Feet From The Anti-Lin	ne and 14410 Fee	t From The OCT			
	Line of Section 15	ownship I North Sange S) tost , nmpm,	ben Juan	County		
	2 0. 000.00.		, 100 23		county		
III.	DESIGNATION OF TRANSPOR	RTER OF OIL AND NATURAL GA	AS				
	Name of Authorized Transporter of C.	1 cr Condensate [7]	Address (Give address to which	h approved copy of this form is to be sen	rt)		
	i latem		Farmington, ike il	extes 67401			
	Name of Authorized Transporter of C	asingbeda Gas 🔲 or Dry Gae 📆	Address (Give address to which approved copy of this form is to be sent)				
	Loutiner Union Laure	and the contract of the contract of	The state of the s	11: Attn: Robert McGrar	n y		
	If well produces oil or liquids,	Unit Sec. Twp Hae.	is gas actually connected?	When	· 4		
	give location of tanks.	1 1 10 1310 0	ilo	·			
	If this production is commingled w	rith that from any other lease or pool,	give commingling order number	er:	***		
	COMPLETION DATA						
	Designate True of Complete	Oil Well Gos Well	New Well Workover Dee	pen Plug Back Same Restv. Diff	Res'v.		
	Designate Type of Complet	131 — ,A, , , , , , , , , , , , , , , , , ,	3 3 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	. I I			
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.			
	9/11/75	10,/4,/79	5075 10	. 9300 ft. 11.t. 11.	•		
	Elevations (DF, RKB, RT, GR, etc.,	l l	Top Oil/Gas Pay	Tubing Depth			
	6449 ft. u.i.	Cosaver le	5171 ft. h.d.				
	Perforations			Depth Casing Shoe			
	5171 - 570C						
	TUBING, CASING, AND CEMENTING RECORD						
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT			
	15"	10-3/49	4.7 ft.	350			
	3-3/4"		22/0 ft.	34,0 21 (11) 1 (11) 320			
	(-1/4)	- A-1/11 AUSEUS	5500 Ft. Octo	1 (B) 1 (C) 320			
		A 6 50 50 50 50 50 50 50 50 50 50 50 50 50					
V.		FOR ALLOWABLE (Test must be a	ifter recovery of total volume of le epth or be for full 24 hours;	pad oil and must be equal to or exceed to	op allow•		
	OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump,	mas lift etc.)			
	Date First New Oil Han 10 Idaks	Date of Leat	Producing Memod (1 100, pamp)	Man 1990 Colly			
	Length of Test	Tubing Pressure	Casing Pressure	CholerSize			
	Length of Test	- many 1 rooms			,		
	Actual Prod. During Test	Ctl-Bbis.	Water - Bbls.	Gas-MCF	}		
	Actual Prod. During 1 est	Can Care Care Care Care Care Care Care Care		007 19 078	1		
	l		·				
	GAS WELL						
	Actual Prod. Test-MCF/D	Length of Test	Bbls, Condensate/MMCF	Gravity of Condensate			
	1741) Sours					

Testing Method (pitot, back pr.) Casing Pressure (Shut-in) Tubing Pressure (Shut-in)

Original signed by

Dun R. Collier

(Signature)

(Date)

october 14, Title)

		· - · · · · · · · · · · · · · · · · · ·
OIL	CONSERVATION	COMMISSION

Choke Size

VI. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION COMMISSION			
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given	APPROVED		, 19	
above is true and complete to the best of my knowledge and belief,	BY	90.6: 31 121 PNTS (2.11 - 12)	View Miles. No. 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 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.

Senerate Forms C-104 must be filed for each pool in multiplu