				gradient gebout de state de st	
	Control of FICE				1
1.	B.O.A. OIL & GAS CO. Address 3539 E. 30th Street Suite 108, Farmington, New Mexico, 87401				
	Recompletion Cil Dry Ga Change to Ownership Conder If change of ownership your name and address of previous owner	1 1 1	native tra	nsporter	
11.	DESCRIPTION OF WELL AND LEASE [Vell No., For. Name, including F	ormation	Kind of Lease	Lease No.	7
	Ute Mtn. "B" 10 Verde Gall	up	State, Federal or F	red Mi 230	-
	Unit Letter N : 535 Feet From The South Lin	NI (D) (G: Au	
!!!.	DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GA	P.O. Box 1528	o which approved co Farming	cpy of this form is to be sent. EON, N.M. 87401 th 84532 opy of this form is to be sent.	
	Mc Dougald oil Co None of Authorized Transporter of Cosingneed Gas or Dry Gas If well produces cil or liquids,	Is gas actually connecte			1
	give location of tanks. N 29 31N 15W If this production is commingled with that from any other lease or pool,	NO give commingling order	number:		ر
IV.	COMPLETION DATA Designate Type of Completion - (X) Oil Well Gas Well	New Well Workover	Deepen Plu	ug Back Same Restv. Diff. Restv	
	Date Spudned Date Compl. Ready to Pros.	Total Depth		B.T.D.	
	Elevations (DF, RKB, RT, GR, etc., Name of Producing Formation	Top Cil/Gas Pay		epth Casing Shoe	-
	Perforations				
	TUBING, CASING, AN HOLE SIZE CASING & TUBING SIZE	D CEMENTING RECOR		SACKS CEMENT	1
					-
		(must be equal to or exceed top allo	<u> </u>
V	OIL WELL	lepth or be for full 24 hours Producing Method (Flow			٦
	Date First New Oil Run To Tanks Date of Test	Casing Pressure	 	CAN PARENTE NAME OF THE PARENTE NAME OF THE PARENTE	-
	Length of Test Tubing Pressure	Water-Bbis.	Go	- 1983	$\frac{1}{2}$
	Actual Prod. During Test Cit-Bois.	W.1.61 - 22.67		JUN 16 1982 CON. COM.	ل
	GAS WELL Actual Prod. Test-MCF/D Length of Test	Bbis. Condensate/MMC	F G	ravity Condendie	٦
-	Testing Method (pirot, back pr.) Tubing Pressure (Shut-in)	Casing Pressure (Shut	:-in) ©	hoke Size	-
OIL CONSERVA					
	Commission have been complied with and that the information gives at one is true and complete to the best of my knowledge and belief.	APPROVED	Original Signed by CHARLES GHOLSON PERMITY ON & GAS INSPECTOR, DIST. #3		
	(Signature) Operator (Title) June 15, 1982 (Date)	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. Separate Forms C-104 must be filled for each pool in multiply completed wells.			