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DISTRIBUTION SANTA FE	NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE		Form C-104 Supersedes Old C-104 and C-11
U.S.G.S. LAND OFFICE I RANSPORTER GAS DPERATOR PRORATION OFFICE	AUTHORIZATION TO 1	AND FRANSPORT OIL AND NATURAL	Effective 1-:-65
Consolidated 011	& Gas Inc.		
P.O. Box 2038, P. F. eason(s) for filling (Check proper town Well	Change in Transporter of:	Other (Please explain) 7 Gas	
If change of ownership give name at d address of previous owner			
II. DESCRIPTION OF WELL AN		N	
Government Cain		Name, Including Formation	Kind of Lease State, Federal or Fee Federal
	951 Feet From The North	Line andFeet From	n The Rast
Line of Section 25 ,	Township 31 North Range	13 West , NMPM,	San Juan County
I ame of Authorized Transporter of I ame of Authorized Transporter of Southern Union I well produces oil or liquids, tive location of tanks.	Casinghead Gas or Dry Gas Unit Sec. Twp. Rge.	Address (Give address to which app Address (Give address to which app Is gas actually connected?	roved copy of this form is to be sent) Reference to the sent of this form is to be sent) Reference to the sent of the sent o
If this production is commingled	with that from any other lease or po		
V. COMPLETION DATA Designate Type of Comple	etion $=$ (X)	New Well Workover Deepen	Plug Back Same Restv. Diff. Restv.
Tate Sprided	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
i col	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
Enforations			Depth Casing Shoe
	TUBING, CASING, A	AND CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
V. TEST DATA AND REQUEST	FOR ALLOWARIE (Test must b	e after recovery of total volume of load o	il and must be equal to or exceed top allow-
OH. WELL ate First New Oil Run To Tanks	able for this	e depth or be for full 24 hours) Producing Method (Flow, pump, gas	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	Gas -CRECEIVED
GAS WELL			FEB 26 1965
r ctual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravi OIL COM. DIST. 3
esting Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size
I. CERTIFICATE OF COMPLIA	INCE	OIL CONSERV	ATION COMMISSION
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		APPROVED FEB 2 6 1965 Original Signed Po A. R. KENDRICK	
	· · ·	TITLEPETROLEUM ENG	AMERIA DIST. NO. 3

Production Experintendant

(Date)

2-26-65

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 Sections I, II, III, and VI only 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 completed wells.