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DISTRIBUTION	NEW MEX	NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE					C-104	
SANTA FE							edes Old C-1	04 and C-110
FILE			AND			Effect	1 <b>ve</b> 1-1-65	
U.S.G.S.	AUTHORIZATIO	N TO TRAI	NSPORT	OIL AND N	ATURAL G	AS		
LAND OFFICE								
TRANSPORTER OIL /								
OPERATOR 3								
PRORATION OFFICE								
Operator WTR Oil Company								
Addre≶s								
P.O. Drawer LL, Co. Reason(s) for filing (Check proper	box)	321		Other (Please	explain)		<del></del>	
New Well	Change in Transporte							
Recompletion	011	Dry Ga	~~~					
Change in Ownership X	Casinghead Gas	Conder	isate					
f change of ownership give nar and address of previous owner	Getty Oil Com	pany, P.	O. Box	3360, Ca	sper, Wyo	oming	82602	
DESCRIPTION OF WELL A	ND LEASE							
Lease Name	Well No. Pool Name	, including F	ormation		Kind of Lease	reu	eral	Lease No.
Navajo "P"	8 Many	Rocks C	Gallup		State, Federa	14-	<u>20-600+3</u>	540
Location								
Unit Letter M	660 Feet From The So	uth Lir	se and <u>6</u>	60	Feet From 1	rhe Wes	<u>t</u>	
Line of Section 35	Township 32N	Range	17W	, NMPM	San .	Juan		County
DESIGNATION OF TRANSF	PORTER OF OIL AND NA	TURAL GA	\S	(Give address (	a which approx	ued conv of thi	s form is to h	e senti
Name of Authorized Transporter of	of Oil 😿 or Condensate	<u></u>	ļ					
Shell Pipeline Cor	poration	Gas	Address	.O. Box 1	588 Far	mington,	NM 874 s form is to b	
Name of Authorized Transporter of	of Dry	Gas	Address	10100 244,000			,	
		Doe.	le age di	ctually connect	ed? Who	<b>e</b> n		<del></del>
If well produces oil or liquids,	Unit Sec. Twp.		is don a	studiny common	1			
give location of tanks.		N 17W	<u> </u>					
If this production is commingle	ed with that from any other le	ase or pool,	give com	mingling orde	number:			
COMPLETION DATA	Oil Well	Gas Well	New Wel		Deepen	Plug Back	Same Res'v.	Diff. Res'v
Designate Type of Comp		1	1	1	1 1	1	! !	!
	Date Compl. Ready to Pr		Total De	pth		P.B.T.D.	L	<u> </u>
Date Spudded	Date Compt. Heady to 1.			•				
Elevations (DF, RKB, RT, GR, e	te.j Name of Producing Form	Name of Producing Formation Top Otl/Gas Pay T		Tubing Dept	Tubing Depth			
Perforations						Depth Casir	g Shoe	
	THRING A	CASING AN	D CEMEN	ITING RECO	RD	<del></del>	<u></u>	
			D CEME!	DEPTH \$		S/	CKS CEME	NT
HOLE SIZE	CASING & TUBI	7.5 312.5	-					
			<del>- </del>					
		·· <del>···································</del>						
		,,,_,_,_,_,	<del></del>					
TEST DATA AND REQUE	ST FOR ALLOWABLE (	Test must be	after recov	ery of total vol for full 24 hour	ume of load of	and must be e	qual to or exc	eed top allo
OIL WELL Date First New Oil Run To Tani		Bote lo. tuta (	Product	ng Method (Flo	w, pump, gas l	ift, etc.)		<del></del>

OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)					
Length of Test	Tubing Pressure	Casing Pressure	Choke Size				
Actual Prod. During Test	Oti-Bbie.	Water - Bble.	Gae - MCE				
GAS WELL			1958 1 2 1979				

Bbls. Condensate/MMCF Actual Prod. Test-MCF/D Length of Test Casing Pressure (Shut-in) Choke Size Tubing Pressure (Shut-in) Testing Method (pitot, back pr.)

## VI. CERTIFICATE OF COMPLIANCE

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.

James Delaster
(Signapure)
(Title)
(Date)

OIL CONSERVATION COMMISSION

0,2 00.						
APPROVED	SEP	1	2	1Q	74	, 19
Original	Signe	d k	у	Α.	R.	Kendrick
TITLESUPERVISOR DISTRICT 架 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.

Separate Forms C-104 must be filed for each pool in multiply completed wells.