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NO. OF COPIES RECEIVED				
DISTRIBUTION	NEW MEXICO OIL	CONSERVATION COMMISSION	Form C-104	
SANTA FE		FOR ALLOWABLE	Supersedes Old C-104 and C-11	
FILE /		AND	Effective 1-1-65	
U.S.G.S.	AUTHORIZATION TO TRA	ANSPORT OIL AND NATURA	AL GAS	
LAND OFFICE			3/13	
TRANSPORTER OIL /				
GAS				
OPERATOR 3				
PRORATION OFFICE				
Operator WTR Oil Company				
P.O. Drawer LL, Corte	ez, Colorado 81321			
Reason(s) for filing (Check proper box		Other (Please explain)		
New We!I	Change in Transporter of:			
Recompletion	Oil Dry G	as [		
Change in Ownership X	Casinghead Gas Conde	ensate		
If change of ownership give name	Cotte Oil Company	O P 2260 0		
and address of previous owner	Getty Off Company, P	.O. Box 3360, Casper,	Wyoming 82602	
II. DESCRIPTION OF WELL AND				
Lease Name	Well No. Pool Name, Including F		rederat   Eaces No.	
Navajo "P"	10   Many Rocks (	Gallup state, re	oderal or Fee 14-20-600-3540	
Location L 19 Unit Letter;	980 Feet From The South Li	ne and 660 Feet F	rom The West	
Line of Section 26	wnship 32N Range	17W , NMPM, Sa	an Juan County	
II. DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL GA	AS		
Name of Authorized Transporter of Ot			pproved copy of this form is to be sent)	
Shell Pipeline Corpor		P.O. Box 1588, F	farmington, NM 87401	
Name of Authorized Transporter of Ca			pproved copy of this form is to be sent)	
If well produces oil or liquids, give location of tanks.	Unit   Sec.   Twp.   P.ge.   C   34   32N   17W	Is gas actually connected?	When I	
If this production is commingled wi	ith that from any other lease or pool,	give commingling order number:		
V. COMPLETION DATA				
Designate Type of Completi	Oil Well Gas Well	New Well Workover Deeper	Plug Back   Same Resty. Diff. Resty.	
Designate Type of Completi		<u> </u>	1 1	
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
Perforations			Depth Casing Shoe	
	TURING CACING AN	D CENENTING DECARD		
		D CEMENTING RECORD	CACKE OFFICE	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
,	<del> </del>	<u> </u>		
TO THE AND DESIFERED	OD ATTORIANTE (Total			
V. TEST DATA AND REQUEST F OIL WELL	OR ALLOWABLE (Test must be able for this d	after recovery of total volume of load 'epth or be for full 24 hours)	loil and must be equal to or exceed top allow-	
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, go	as life, etc.)	
Length of Teet	Tubing Pressure	Casing Pressure	Choke Size	
Landin of the control			Control of the Contro	
Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	Gas MCF	
			1	
GAS WELL			19. 2019	
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
Testing Method (pitot, back pr.)	Testing Method (pitot, back pr.) Tubing Pressure (Shut-in)		Chare Size	

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.

(Title)

OIL CONSERVATION COMMISSION 4 3 1070

APPROV	ED		ن ا	IJ	(9_, 19	
BY	Original	Signed	hv A.	R.	Kendrick	
TITLE		SI	<u>ipe</u> rvisor	DIST	rrict # \$	
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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.