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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

Operator James P. Moosley	
Address Box 245, Mancosky, Colorado 81648	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name and address of previous owner Murphy Oil Corp., 200 Jefferson Ave., El Dorado, Arkansas 71 730

II. DESCRIPTION OF WELL AND LEASE

Lease Name Navajo AA	Well No. 10	Pool Name, including Formation North Mary Rocks Gallup	Kind of Lease State, Federal or Fee Indian	Lease No.
Location Unit Letter <u>K</u> ; <u>160</u> Feet From The <u>South</u> Line and <u>1690</u> Feet From The <u>West</u>				
Line of Section <u>17</u> Township <u>30N</u> Range <u>17E</u> , NMPM, <u>San Juan County</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) Shell Pipeline Co. P.O. Box 1500, Farmington, New Mexico 87401					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit <u>K</u>	Sec. <u>17</u>	Twp. <u>30N</u>	Rge. <u>17E</u>	Is gas actually connected?	When

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		<u>XX</u>							
Date Spudded <u>10 - 24 - 63</u>	Date Compl. Ready to Prod. <u>10 - 31 - 63</u>	Total Depth <u>1740'</u>		P.B.T.D. <u>1740'</u>					
Elevations (DF, RKB, RT, GR, etc.) <u>5679' GL</u>	Name of Producing Formation <u>Lower Gallup</u>	Top Oil/Gas Pay <u>1690'</u>		Tubing Depth <u>1625'</u>					
Perforations <u>Notches 1627' and 1699'</u>				Depth Casing Shoe <u>1740'</u>					
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
<u>9"</u>	<u>7"</u>		<u>33.30'</u>		<u>6 Sx</u>				
<u>6 1/2"</u>	<u>4 1/2"</u>		<u>1740'</u>		<u>75 Sx</u>				

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

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	Oil - Bbls.	Water - Bbls.	
GAS WELL			
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	DIST. 3

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 P. Moosley
(Signature)
owner
(Title)
May 25, 1970
(Date)

OIL CONSERVATION COMMISSION
MAY 27 1970

APPROVED _____, 19____
BY Original Signed by Emery C. Arnold
SUPERVISOR DIST. 73
TITLE _____

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.