	,			<i>,</i>	
1	NO. OF COPIES RECEIVED	1		/	
	DISTRIBUTION	4		/	
	SANTA FE	1	CONSERVATION COMMISSION	Form C-104	
	FILE	REQUES	T FOR ALLOWABLE	Supersedes Old C-104 and C-11 Effective 1-1-65	
	U.S.G.S.	AUTHODIZATION TO TE	AND	0.46	
	LAND OFFICE	AUTHORIZATION TO TH	RANSPORT OIL AND NATURAL	GAS	
		4			
	TRANSPORTER GAS	†			
	OPERATOR /	-			
	PROPATION OFFICE	1			
I.	Operator				
	James P	Woosley			
	Address	#30016J			
	Box 245, Rangely, Colorado 81648				
	Reason(s) for filing (Check proper box	/ January 1	Other (Please explain)		
	New Well	Change in Transporter of:			
	Recompletion	Oil Dry C	Gas 🔲		
	Change in Ownership 7	Casinghead Gas Cond	densate		
	If change of ownership give name and address of previous owner		O Jefferson Ave., El Do	rado, Arkanses 71730	
11.	DESCRIPTION OF WELL AND	Well No. Pool Name, Including	Formation Kind of Lea	ise Lease No.	
	Lease Name		State Fade	ard or Fee	
	Neve jo AA	5 North Meny	ocks Gallup	Indian	
	Location				
	Unit Letter B : 705 Feet From The North Line and 1999 Feet From The East				
	Line of Section 18 Township 32N Range 17% , NMPM, San Juan County County				
	Line of occurred to the state of the state o				
111	DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL O	GAS		
411.	Name of Authorized Transporter of Oil or Condensate Address (Give address to which approved copy of this form is to be sent)				
	Shell Pipeline Oc. P.O. Box 1588. Farmington, New Kexico 87401 Name of Authorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent)				
	Unit Sec. Twp. Rge. Is gas actually connected? When				
	If well produces oil or liquids, give location of tanks. B 18 32N 17 1				
	3		1		
	If this production is commingled wi	th that from any other lease or poo	i, give comminging order idinber.		
3 V .	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.	
	Designate Type of Completi	on – (X)	1		
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
	<u> </u>	·	14841	14791	
	7 - 13 - 63 Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
	5350' GL	Lower Gellup	1438	14421	
	Perforations	Bone: Geliab	11,32	Depth Casing Shoe	
		- 551 w/4 SPF and note	haa = 1 lili = 51;	14791	
	1440% = 41% end 95	TURING CASING A	ND CEMENTING RECORD		
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
	9*	71	201	8 Sx	
	7				
	61.*	43.*	1478.72	35 Sx	
	0,5		172 100 150		
		LOD ALL OWARDS F. (T.)	formation of land of	oil and must be equal to or exceed top allow-	
V.	TEST DATA AND REQUEST F	able for this	depth or be for full 24 hours)	the mast be equal to or exceed top associ	
	OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas	lift, etc.)	
	Date 1 Hot New Oil 11th 10 Paris				
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
	Lendin of Len			CCCI	
	Actual Prod. During Test	Oil-Bbis.	Water-Bbls.	Gag M	
	Motual From During 1 and			/ UTOTIALLY	
	l			Man	
	CAS WELL			MAY 27 1970	
	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Groupty of Condensate	
		-		OIL CON. COM	
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke SPIST. 3	

VI. CERTIFICATE OF COMPLIANCE

Testing Method (pitot, back pr.)

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

BY Original Signed by Emery C. Arnoid

bove is the different to the same
James & Theasley
// (Signature) //
OCUNEY (Title)
May 25 1970
(Date)

OIL CONSERVATION COMMISSION 2 7 1970

_, 19. APPROVED.

SUPERVISOR DIST, 755 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.