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IRANSPORTER	OIL				
	GAS				
OPERATOR		1			

	DISTRIBUTION SANTA FE FILE U.S.G.S. LAND OFFICE TRANSPORTER OIL GAS OPERATOR	REQUEST F	NSERVATION COMMISSION OR ALLOWABLE AND ISPORT OIL AND NATURAL GA	Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65	
1.	PRORATION OFFICE Operator				
	ARI-MEX Oil &				
	C/O Walsh Engi Reason(s) for filing (Check proper box)	P.O. Box 2 1 Corp. Farmingtor Other (Please explain)	254 n, NM 87401		
New Well Change in Transporter of: Recompletion Oil X Dry Gas					
	Change in Ownership	Casinghead Gas Condens	ate		
	If change of ownership give name and address of previous owner			14-20-603-583	
11.	DESCRIPTION OF WELL AND L	Well No. Pool Name, Including For		Navajo Legse No.	
	Navajo "B"	2 Mesa Gallu	p State, Federal o	or Foo Indian Above	
	Unit Letter I ; 2310	Feet From The South Line	and 330 Feet From Th	. East	
	Line of Section 15 Town	nship 32N Range 1	L8W , NMPM, San S	Juan County	
III.	DESIGNATION OF TRANSPORT	ER OF OIL AND NATURAL GAS	Address (Give address to which approve	d copy of this form is to be sent)	
	Name of Authorized Transporter of Oil Giant Refinery, Inc		P.O. Box 256 Farm:	ington, NM 87401	
	Name of Authorized Transporter of Casi	ne of Authorized Transporter of Casinghead Gas or Dry Gas		Address (Give address to which approved copy of this form is to be sent)	
	None If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected? When		
	give location of tanks.	I 15 32N 18W	· · · · · · · · · · · · · · · · · · ·		
IV.	If this production is commingled with COMPLETION DATA		New Well Workover Deepen	Plug Back Same Restv. Diff. Restv.	
	Designate Type of Completion	n – (X)	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	
	TUBING, CASING, AND HOLE SIZE CASING & TUBING SIZE		CEMENTING RECORD DEPTH SET	SACKS CEMENT	
	HOLE SIZE	CASING & FUBING SIZE			
V	. TEST DATA AND REQUEST FO	and must be equal to or exceed top allow-			
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas life	s, etc.)	
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
	Actual Prod. During Test	Oil-Bbis.	Water - Bble.	Gas - MCF	
	GAS WELL Actual Prod. Test-MCF/D Length of Test		1		
			Bbls. Condensate/MMCF	Gravity of Condensate	
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
VI. CERTIFICATE OF COMPLIANCE		OIL CONSERVATION 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			
		TITLE SUPERVISOR DIST. #3			
	FOR: ARI-MEX Oil & Exploration, Inc. Ewell N. Walsh, (Signature) President		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 allow-		
(Title) 11-8-77		able on new and recompleted wells. Fill out only Sections I, II, III, and VI for changes of owner conditions.			

(Date)

able 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.