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- 1	HO. OF COPIES HECEIVED			ļ	
	DISTRIBUTION	NEW MEXICO OIL CO	ONSERVATION COMMISSION	D 0 est	
- 1	SANTA FE /			Form C-104 Superfields Old C-104 and C-110	
	FILE AND				
	U.S.G.S.	411711001747101170 70 404		. / KLU	
	LAND OFFICE	AUTHORIZATION TO TRA	NSPORT OIL AND NATURAL GA	AS / Table	
			$\sim \Lambda$	titt i see	
	TRANSPORTER OIL		12.	JULA	
	GAS	·	$(V)_{i}$		
	OPERATOR 2		VO	OIL COM. /	
1.	PRORATION OFFICE			D/ST. 3 /	
	Operator				
Address P. D. Box 1497 Farmington, New Mexico 87401 Reason(s) for filing (Check proper box) Other (Please explain)				-	
				0344	
	Reason(s) for filing (Check proper box)	4/ Farming!	on New Mexic	0 8/40/	
	Reason(s) for filling (Check proper box)	/	Other (Please explain)		
	New Well	Change in Transporter of:	<u>_</u>	·	
	Recompletion	Oil Dry Gas	· <u> </u>		
	Change in Ownership	Casinghead Gas Conden	sate		
	If change of ownership give name				
and address of previous owner					
11.	II. DESCRIPTION OF WELL AND LEASE				
	Lesse Name	Well No. Pool Name, Including Fo		Navajo Legse No.	
	Navajo B	3 Mesa Ga	//up State, Federal	or Fee Tribe 603-583	
	Unit Letter B : 1/50 Feet From The N Line and 1,480 Feet From The E				
	Line of Section 15 Township 32N Range 18W, NMPM, San Juan County				
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS					
•==•	Name of Authorized Transporter of Oil	or Condensate	Address (Give address to which approve	ed copy of this form is to be sent)	
		بعر المعالمة	``		
	Plateau, Inc.		Box 108 Farming Address (Give address to which approve	100 Nol7 87401	
	Name of Authorized Transporter of Cas	inghead Gas or Dry Gas	Address (Give address to which approve	opy of this form is to be sent;	
	Noire		•		
		Unit Sec. Twp. P.ge.	Is gas actually connected? When	1	
	If well produces oil or liquids,		!		
	give location of tanks.	15 32N:18W	l No		
	If this production is commingled wit	h that from any other lease or pool,	give commingling order number:		
If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Oil Well Gas Well New Well Workover Deepen Plug Back Same For the pool Same For the pool Same For the pool Plug Back Same For the pool Same For the pool Plug Back Same For the pool Same For the pool Plug Back Plug Ba					
				Plug Back Same Res'v. Diff. Res'v.	
		Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
	Date Spudded	Date Compi. Heady to Prod.	1 -	1 = 1 1 1	
	3/20/70 Elevations (DF, RKB, RT, GR, etc.;	3/27/70	/, 275 'Gr. Top Oil/Gas Pay	1279' Tubing Depth	
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation			
	C 2/0 / C =	Gallup	1,197'	1200'	
	33/8 6/	Garrep	<u> </u>	Depth Casing Shoe	
	Periorations			,	
		TUBING, CASING, AND CEMENTING RECORD			
			T	24 242 254545	
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
	8 3/4"	7''	/2'	يري ک	
	5 5/9"	4//2"	1.274'	35 sx	
				·	
		1			
The state of the s				1	
V.	V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allow able for this depth or be for full 24 hours)				
OIL WELL			eta l		
	Date First New Oil Run To Tanks	Date of Test	_	, •,	
	12/1/70	12/1/70	Casing Pressure		
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
				·	
	Actual Prod. During Test	Oil-Bbls.	Water - Bble.	Gas-MCF	
		l	0	TSTM	
	3	3	<u> </u>		
GAS WELL					
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
			1	ļ	
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
	lesting Method (pitot, occa pr.)				
VI.	CERTIFICATE OF COMPLIAN	C E	OIL CONSERVA	TION COMMISSION	
			SEP 3 1971		
	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, IV		
			1	y Emery C. Arnold	
			TITLE SUPERVISOR DIST. #3 This form is to be filed in compliance with RULE 1104.		
	(Signa	ature)	well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.		
		and \			
	(Title) 7/28/7/		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 transporten or other such change of condition.		
	(De	ue)	Well name or number, or transport	he filed for each seal in multiple	
	·		Separate Forms C-104 must	be filed for each pool in multiply	
<u></u>			completed wells.		