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DISTRIBUTION			
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
IRANSPORTER	OIL		
	GAS	/	
OPERATOR	2		
PRORATION OFFICE			

NEW MEXICO OIL CONSERVATION COMMISSION

Form C = 104

SANTA FE	+		REQUEST	FOR ALLOWABLE		Supersedes Old C-104 Effective 1-1-65	and C-11
U.S.G.S.	1-	-	AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS				
LAND OFFICE		AUT	HORIZATION TO TRA	ANSPORT OIL AND N	NATURAL GA	<i>1</i> S	
OIL							
TRANSPORTER GAS	7	-					
OPERATOR	2				AP	30-045-23102	
PRORATION OFFICE							
Operator							
Great Wester	n Dr	illing Co)。				****
Address							
125 Petr		m Plaza	Farmington, New	Mexico 87401			
Reason(s) for filing (Check p	roper bo			Other (Please	explain)		
New Well		-	e in Transporter of:				
Recompletion		Oil	Dry Go	F-1			
Change in Ownership		Casing	head Gas Conder	isdle			
f change of ownership give							
and address of previous ow	ner						
DESCRIPTION OF WELL	I. ANT	LEASE					
Lease Name	<u> </u>	7 1711/1011	Well No. Bool No.	me, Including Formation		Kind of Lease	
J. E. Decker			l - l	co P. C.		State, Federal or Fee Fee	
Location				,			
Unit Letter	,1	480 Feet B	From The South Lin	e and <u>1580</u>	Feet From Th	e East	
Line of Section 12	, T	ownship 32	N Range 12	W , NMPM,	, San	Juan (County
DESIGNATION OF TRAI					to which approve	d copy of this form is to be ser	1
Name of Futhorized Transpor	ter or O	,11 0;	Condensate	Address (Give address t	o which approve	a copy of this form is to be set	11)
Name of Futhorized Transpor	ter of C	asinahead Gas	or Dry Gas	Address (Give address t	o which approve	d copy of this form is to be ser	nt)
El Paso Nat			Sec. Twp. Rge.	ls gas actually connected	Farmingte	on, New Mexico 8740	21
If well produces oil or liquids give location of tanks.	š,			No	1		
fating and tracking in any and			and other losses or peet				
f this pro luction is commin COMPLETION DATA	igied w	vith that irom	any other lease or pool,	give comminging order	number.		
	1	· /V\	Cil Well Gas Well	New Well Workover	Deepen	Plug Back Same Res'v. Diff	f. Restv.
Designate Type of Co	mpiet	10n – (A)	X	X	<u> </u>	1	
Date Spud led		Date Compl	l. Ready to Prod.	Total Depth		P.B.T.D.	
9-4-78		9-9		3035		2989	
Pool		l	oducing Formation	Top Oll/Gas Pay		Tubing Depth	
Blanco P. C.		Pictu	red Cliffs	2892		None 2910	
Perforations						Depth Casing Shoe	
			THE NAME OF CASE AND	A CENTRAL DECOR			
HOLE SIZE		CASI	TUBING, CASING, AND NG & TUBING SIZE	DEPTH SE		SACKS CEMENT	
121			" 24# K-55	· 104'		90 sx reg + 3% ClCa	
7-7/8"			.5# K-55			100 sx class B and 525	
1-170		42 10	8 JII 15 J J	<u> </u>		sx Howco light	
						222 220 1100 2225220	
TEST DATA AND REQU	EST !	FOR ALLOW	VABLE (Test must be a	fter recovery of total volum	me of load oil an	d must be equal to or exceed to	op allow-
OIL WELL			able for this de	pth or be for full 24 hours)		
Date First New Oil Run To T	anks	Date of Tes	st	Producing Method (Flow	, pump, gas lift,	etc.)	
						,	
Length of Test		Tubing Pre	ssure	Casing Pressure		Choke Size	
		0.1. 5)		511	<i>,</i>		
Actual Prod. During Test		Oil-Bbls.		Water-Bbls.	/	God-NCT IN TID	
				<u> </u>			
CIAC WEST T			•			JAN 2 6 1979	
GAS WELL Actual Prod. Test-MCF/D		Length of T	*est	Bbls. Condensate/MMCF	· \	Bravity of Condensate	
		24 hr		Date: Condendate, while		DIST. 3	
CAOF 552 Testing Method (pitot, back p	or.)	Tubing Pre		Casing Pressure		Choke Size	
1 point back pre				890 SI		•50	
CERTIFICATE OF COM		NCE		1	`ONSEDVAT		
CERTIFICATE OF COM	FLIA	NCE				TON COMMISSION	
Thoroby contify that the my	ton oné	t regulations	of the Oil Consequerion	APPROVED	lar i	, 19	
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 complet	e to ti	he best of m	y knowledge and belief.	BY Jigmal Sign	<u> 138 ap 1 </u>		
* ** ** ** ** ** ** ** ** ** ** ** ** *			-	TITLE DEPUTY	jih ja er e e e		
_		1					
D.EBay	.7					mpliance with RULE 1104.	
D.T.WWY	<u> </u>	nature l		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			
(Signature)			tests taken on the well in accordance with RULE 111.				
Supérintendent (Title)			All sections of this form must be filled out completely for allow-				
7	24 - 79			!	=	s.	01115 0=
		7 Date)				nd VI only for changes of or other such change of co	

Fill out Sections I, II, III, and VI only 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.