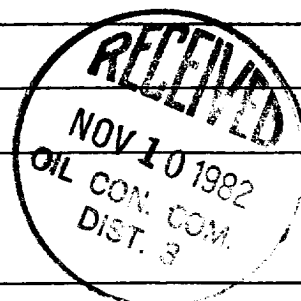


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TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

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 1-1-83

Operator WTR OIL COMPANY	
Address Drawer LL, Cortez, Colorado 81321	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input checked="" type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>



If change of ownership give name  
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name Navajo "P"	Well No. 17	Pool Name, including Formation Many Rocks Gallup	Kind of Lease Federal	Lease No. 14-20-600-3540
Location Unit Letter E : 330 Feet From The West Line and 2309 Feet From The North Line of Section 35 Township 32N Range 17W, NMPM, San Juan County				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Ciniza Pipe Line, Inc.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1887, Bloomfield, New Mexico 87413
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 C Sec. 34 Twp. 32N Rge. 17W Is gas actually connected? When

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

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v. <input type="checkbox"/>	Diff. Res'v. <input type="checkbox"/>
Date Spudded 9-24-82	Date Compl. Ready to Prod. 10-15-82	Total Depth 1768'	P.B.T.D. 1715'					
Elevations (DF, RKB, RT, CR, etc.) GL 5786.1	Name of Producing Formation Many Rocks Gallup	Top Oil/Gas Pay 1606'	Tubing Depth 1605'					
Perforations 1606-1616' w/2 shots per foot.			Depth Casing Shoe 1754'					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
9"	7"	83'	59 cu ft					
6 1/2"	4 1/2"	1754	264 cu ft					

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 Test tank 10-15-82	Date of Test 10-15-82	Producing Method (Flow, pump, gas lift, etc.) D-25 Pump Jack	
Length of Test 24hr	Tubing Pressure nil	Casing Pressure nil	Choke Size open
Actual Prod. During Test 128 bbl fluid	Oil-Bbls. 18 bbl	Water-Bbls. 110 bbl	Gas-MCF tstm

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

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.

Lee E. Searcy  
(Signature)

Office Manager

11-11-82  
(Date)

OIL CONSERVATION COMMISSION  
11-16-82 NOV 16 1982  
APPROVED  
BY Original Signed by CHARLES GHOLSON  
TITLE DEPUTY OIL & GAS INSPECTOR, DIST. #3

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