NO. OF COPIES RECEIVED				
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SANTA FE		1		
FILE				
U.S.G.S.				
LAND OFFICE				
TRANSPORTER	OIL			
	GAS			
OPERATOR		<i>-</i>		
PRORATION OFFICE				

Nov. 18, 1969

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IV.

NEW MEXICO OIL CONSERVATION COMMISSION

Form C+104

FILE /	REQUEST	FOR ALLOWABLE	Supersedes Old C+104 and 1 - Effective 1-1-5	
U.S.G.S.	AUTHORIZATION TO TR	AND ANSPORT OF AND NATURAL		
LAND OFFICE		(\mathcal{A})		
TRANSPORTER GAS		(-) 11)		
OPERATOR PROPATION OFFICE				
Operator		a permi	<u> </u>	
Address	o Broadcasting Compan	S. market		
305 West 9th Reason(s) for filing (Check proper b		76.101 Other (Please explain)		
New Well	Change in Transporter of:			
Recompletion Change in Ownership X X	Oil Dry G	≔ !		
If change of ownership give name and address of previous owner		Iuolishins Compart	jo v. Oik prarili.	
Lease Name	Well No. Pool Name, including i	Cognition Kulf of Le	rase Lease II.	
L.E. Ranch 2	28 1 undesignati	೧,್ State, Fed	erai or Fee	
Unit Letter / E ; 231	10 Fine The East of	ne and 330 feet Fro	m 'an'	
			m the <u>sector</u>	
Line of Section 28	Cownship 98 Range	277 , NMPM, 3.	A KASA TO THE	
	RTER OF OIL AND NATURAL G			
Name of Authorized Transporter of C	Oll or Condensate	Address (Give address to which app	proved copy of this form is to be sent:	
Name of Authorized Transporter of C	Casinghead Gas [] or Dry Gas []	Adstern (Give address to which app	proved copy of this form is to be sent:	
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge.	ls gas actually connected?	When	
If this production is commingled v	with that from any other lease or pool,	<u> </u>		
Designate Type of Complet	$\operatorname{Con} = (X)$ Oil Well Gas Well	New Well Workover Deepen	Plug Back - Same Rest - Diff. Rest	
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
Elevations (DF, RKB, RT, GR, etc.,	Name of Producing Formation	T Od (O D		
Lievations (DF, KKB, KI, GK, etc.)	Name of Producing Formation	! Top Oil/Gas Pay	Tubing Depth	
Perforations			Depth Casing Shoe	
	TUBING, CASING, AN	D CEMENTING RECORD		
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
			<u> </u>	
TEST DATA AND REQUEST DOLL WELL		ifter recovery of total volume of load o epth or be for full 24 hours)	•	
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas	lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
Actual Prod. During Test	Cil-Bbls.	Water-Bbls.	Gas - MCF	
Actual Float During 1481	011-111111	Water - Strain	048 1101	
GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
CERTIFICATE OF COMPLIAN	NCE	OIL CONSERV	ATION COMMISSION	
Thereby 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. Plains Faio Froadcasting Company		APPROVED DEC 2 1969		
				BY
		TITLE OIL AND GAS INSPECTO:		
			evil -	14
by Joseph (Sie	nature	well, this form must be accomp tests taken on the well in acc	panied by a tabulation of the deviation	
rield Repr,	itle)	All sections of this form n	nust be filled out completely for allow	
(1	/	able on new and recompleted t	weile.	

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.