	4					•
	SANTAFE	REQUEST	CONSERVATION CONTROL FOR ALLOWABLE	Form C-104 Supersedes Old	C-104 and C-	
	U.3.5.3.	AUTHORIZATEDIETO Y	AND RANSPORT OIL AND I	NATURAL GAS	Effective 1-1-65	
	: PANSPORTER GAS	JUN 2 6 19 ⁻	73	TA		
1.	PROPATION OFFICE	0.0.0				
	H. E. Prince / ARTESIA, DEFICE					
	606 N. Atkinson, Roswell, New Mexico 88201					
	Reason(s) for filling (Check proper bo	Change in Transporter of:	Other (Pi-2s=	_		
	Recompletion Change in Ownership	Oil X Dry C Casinghead Gas Cond	ensate Tron	n Permi	<u> </u>	
	If change of ownership give name and address of previous owner	aul Slayton, 252,7 N.	Lea, Roswell,	New Mexic	0, 88201	
31.	DESCRIPTION OF WELL AND	LEASE Well No. Pool Name, Including	Formation	Kind of Lease		Lease No.
	Pendergrass	l Linda San A	ndres	State, Federal or Fe	Fee	2000 .10.
	Unit Letter D : 3	30 Feet From The N	the and <u>990</u>	Feet From The	N .	
	Line of Section To	ownship 75 Range26	F, , NMPM,	Cl	laves	County
iII.	DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL G	AS			
	Name of Authorized Transporter of Oil or Condensate Address (Give address to which approved copy of this form is to be sent) Navajo Crude Oil Purchasing Co. Name of Authorized Transporter of Casinghead Gas or Dry Gas 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 Sec. Twp. Rge.	Is gas actually connected	d? When		
į		D 4 7S 26 ith that from any other lease or pool,		number:		
	COMPLETION DATA	Oli Well Gas Well	New Well Workover	***************************************	Back 'Same Res'v.	Diff. Restv
	Designate Type of Completi	on - (X)	Total Depth		i !	1
	Slevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oll/Gas Pay	P.B.	ng Depth	
	· ′					
	Perforations		Dept	h Casing Shoe		
į	HOLE SIZE	TUBING, CASING, AN	D CEMENTING RECORD	·	SACKS CEME	
ĺ	HOLE SILE	CA3110 & 102110 3122	OZF1H3E		SACKS CLINEAT	
} 						
	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)					
-	OH. WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)		,	
 	Length of Tast	Tubing Pressure	Casing Pressure Ch		Choke Size	
-	Actual Prod. During Test	Oil-Bhis.	Water - Bbis. Gas		as - MCF	
'_	GAS WELL					
-	Actual Frod. Test-MCF/D	Length of Test	Bbla. Condensate/MMCF Gr		cravity of Condensate	
	Teating Method (pitot, back pr.)	Tuping Pressure (Shut-in)	Cosing Pressure (Shub-i	Chek	• Size	
`. ∹ĭ, (CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION			
(hereby certify that the rules and regulations of the Oil Conservation commission have been complied with and that the information given bove is true and complete to the best of my knowledge and belief.		APPROVED JUN 29 1373			

This form is to be filed in compliance with RULE 1104.

- 73 (Date)

TITLE OIL AND GAS INSPECTOR

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 walls.

Fill out only Sections I. U. VI. and VI for changes of owner, well name or number, or transported or other such change of condition. Separate Forms C-104 must be filed for each pool in multiply