	STATE OF NEW MEXICO AGY AND MINERALS DEPARTMENT			Form C-104 Revised 10-1-76	
ENE		OIL CONSERVA			
	DISTRIBUTION R	ECEIVED BY P. O. BO			
	V.6.U.8.	EB 4 1985	ALLOWARI E		
	TRANSPORTER DIL	AND O.C. D.			
	OFERATOR IX	ARTESHAT HORIZATION TO TRANSP	ORT OIL AND NATURAL GAS		
1.	PROBATION OFFICE	/			
	Bill G. Isler				
	123 Three Cross Drive, Roswell, NM 88201				
	Reason(s) for filing (Check proper bos)				
	New Well	Change in Transporter of:			
	Recompletion	Casinghead Ges Condens	M I		
	Change in Ownership				
	If change of ownership give name and address of previous owner		, 7100 N. Broadway, S	uite 2-1,	
		Denver, CO 80221			
п.	DESCRIPTION OF WELL AND I	EASE Well No. Pool Name, Including Fo	rmation Kind of Lease	Federal Lease ?	
	Dale-Federal		g, San Andres State, Federal	or Foo LC-06781	
	Legilles				
	Unit LetterJ : 230	8 Feel From The East Line	and <u>1661</u> Feel From T	heSouth	
	Line of Section 26 Township 7 South Range 26 East, NMPM, Chaves Coun				
	DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS				
۰.	DESIGNATION OF TRANSPORT	or Condensate			
	Navajo Crude Oil		P. O. Drawer 175, Al Address (Give address to which approv	ctesia, NM 88201	
	Hame of Authorized Transporter of Casinghead Gas or Dry Gas		Address (Give address to which approv		
		Unit Sec. Twp. Rgs.	Is gas actually connected? Whe	? n	
	If well produces oil or liquids, give location of tanks.	J 26 7S 26E	1	·	
	If this production is commingled with that from any other lease or pool, give commingling order number:				
•	COMPLETION DATA OII Well Gas Well New Well Workover Deepen Plug Back Same Res'v. Diff.				
	Besignate Type of Completio	n = (X) X	х	<u> </u>	
	Ligie Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
	6-15-82	10-9-82	2016 Top Oil/Gas Pay	1996 Tubing Depth	
	Elevations (DF, RKB, RT, CR, etc.)	Name of Producing Formation San Andres	1568	1734	
	3818.7 GD Periorations 1568-1574 24	holes @ .40"	<u> </u>	Depth Casing Shoe	
	1676 - 1700 96 holes 0.40''				
			DEPTH SET	SACKS CEMENT	
	HOLESIZE	CASTING & TUBING SIZE	200'	65 sx.	
	<u> 12 1/4" </u>	<u>8 5×8"</u> <u>4 1/2"</u>	2012'	192 sx.	
	0 3/4				
				and must be equal to be exceed top (
	TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or excent able for this depth or be for full 24 hours)				
	OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas li	11, etc.) Yest 8.80	
	8-23-82	10-9-82	Pump Casing Presewe	Choke Size Pac. 00	
	Length of Test	Tubing Pressure N/A	N/A	N/A	
	24 hrs. Actual Prod. During Test	Dri-Bbie.	Water-Bbls.	Gas - MCF	
	12.60	0.71	11.89	<u>N/A</u>	
	GAS WELL	Length of Test	Bbis. Condenagte/MMCF	Gravity of Condensate	
	Actual Prod. 100 MCr70			Chake Size	
	Teeling Method (pilol, back pr.)	Tubing Presews (Shut-18)	Casing Pressure (Sbut-12)	CADIT SILV	
			OIL CONSERVA	TION DIVISION	
:	CERTIFICATE OF COMPLIANCE I hereby certify that the rules and regulations of the Oli Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.			1985	
			APPROVED		
			BY Original Signed By		
			Leslie A. Clements TITLE Superviser District II		
			This form is to be filed in compliance with RULE 1104.		
	(Signature) (Signature) (Title)		If this is a request for silowable for a newly drilled or deep well, this form must be accompanied by a tabulation of the devi tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for a able on new and recompleted wells.		
	F1=13-3-	<u>1-783</u>	Fill out only Sections I, II, III, and VI the change of cond well name or number, or transporter, or other such change of cond Reparate Forms C-104 must be filed for each peol in mu		
			Separate Forms C-104 must be thed for each poor in and remulated wells.		

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