HO, OF COPIES MICTIVED	!								
DISTRIBUTION									
SANTA FE	- ∴W	EW MEXICO OIL CONSURVATION COMMISSI					Porm C-104		
FILE		REQUEST FOR ALLOWABLE Supersedge Old C					-101 and C-11		
U.S.G.S.		· · · · · · · · · · · · · · · · · · ·	AND				Att 7.1-03		
LAND OFFICE	_ AUTHORIZA	TION TO TRA	ANSPORT O	IL AND N	ATURAL GA	S			
OIL OIL									
TRANSPORTER GAS									
OPERATOR									
PRORATION OFFICE				~~					
Operator							***********		
Apello Oil Comp		Tuo B	A man Print	. Makka					
Reason(s) for filing (Check proper box	()		C. Bur Tu	ici (Please	A.M. 892	40			
New Well	Change In Trans	porter of:	j						
Recompletion	Oil	Dry Go	.a 🔲 📗	Effec	tive 5/1/7	7			
Change in Ownership	Casinghead Gas	Conde	nsate 🔲						
DESCRIPTION OF WELL AND Lease Name Chaveroo "A" St	Well No. Pool I	Jame, including F			(ind of Lease itate, Federal or	Fee State		Lease No.	
Location							' I <u>- 3</u>	774474	
Unit Letter M ; 660	nmm.	Strandt I.			Basis Basis Miles				
Unit Letter # : 660	Feet From Ine_	Bouth Lin	19 avu -PPO		Feet From The				
Line of Section 31	wnship 75	Range	332	, NMPM,		Hoose	volt	County	
DESIGNATION OF TRANSPORT	TER OF OIL AND								
Name of Authorized Transporter of Oil		NATURAL GA	S						
	or Condense			e address to	which approved	copy of this fo	orm is to b	e sent)	
Mobil Pipe Line	or Condenso	ote [Address (Giv					, i	
Name of Authorized Transporter of Cas	or Condenso		Address (Giv		which approved			, i	
Mobil Pipe Line Name of Authorized Transporter of Car Cities Service	or Condenso	ote [Address (Given Address (Given Box 9)	00 Dell address to	which approved	copy of this fo		, i	
Name of Authorized Transporter of Cas	or Condense singhead Gas or Oll Co.	Dry Gas	Address (Given Address (Given	00 Dell address to	which approved	copy of this fo		·	
Name of Authorized Transporter of Cas Cities Service	or Condense singhead Gas or Oll Co.	Dry Gas	Address (Given Address (Given Box 9)	00 Dell address to	which approved	copy of this fo		·	
Oities Service If well produces oil or liquids, give location of tanks. If this production is commingled with	or Condense singhead Gas or O11 Co. Unit Soc. T	Dry Gas	Address (Given Box 9 Address (Given Box 9 1s gas actual)	oo Palls address to	which approved	5221 copy of this fo		·	
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Name of Authorized Transporter of Cas Cities Service If well produces off or liquids, give location of tanks. If this production is commingled with COMPLETION DATA	or Condense or Oil Co. Unit Soc. T	Dry Gas Wp. Pge. 78 358 Tlease or pool, Gas Well	Address (Given Box 1) Address (Given Box 2) Is gas actually give comming	oo below address to	which approved When umber:	6221 copy of this fo 102 8/67	orm is to b	: sent)	
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. 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	Date of Tost	Producing Method (Flew, pump, gas lift, etc.)				
Langth of Test	Tubing Pressure	Casing Pressure	Choke Size			
Actual Pred, During Test	Oil-Bblo.	Water - Bbls.	Gua - MCF			

GAS WELL, Gravity of Condennate Actual Fred, Test-MCF/D Longth of Tost Bbls. Condensate/MMCF Casing Pressure (Shut-in) Choke Size Tubing Prossure (Shut-in) Teating hiethod (piter, back pr.)

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.

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I.

OIL CONSERVATION COMMISSION

TITLE.

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

ORIGI ZIGNED RY, DONNA HOLLER

(Signature)

3, 1977

(Data)

If this is a request for allowable for a newly difficient despended well, this form must be accompanied by a tabulation of the deviction tests taken on the well in accordance with RULE 111. All northons of this form must be filled out corpletely for allow-able on new and recouplated violen.

FIII, out only flactions I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

RECEIVED