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DISTRIBUTION SANTA FE	DISTRIBUTION IEW MEXICO OIL CONSERVATION COMMISS		Form C-104 Supersedes Old C-104 and C-110
FILE		AND	Effective 1-1-65
LAND OFFICE	AUTHORIZATION TO TRA	NSPORT OIL AND NATURAL GA	S
TRANSPORTER OIL			
GAS OPERATOR PRORATION OFFICE			
Operator American Trading and P	roduction Corporation		· · · · · · · · · · · · · · · · · · ·
Address			
P. O. Drawer 992, Midl Reason(s) for filing (Check proper box)	-	Other (Please explain)	
New Well	Change in Transporter of:		
Recompletion Change in Ownership	Oll Dry Gas Casinghead Gas X Conden		
		· · ·	
If change of ownership give name and address of previous owner	ang ng sin an	an an hann an the second s	
. DESCRIPTION OF WELL AND	LEASE Well No. Pool Name, Including Fo		
Lease Name New Mexico State "20"	2 Chaveroo (San A		Free State OG-930
Location			
Unit Letter M; 66	0 Feet From The South Line	e and Feet From Th	• West
Line of Section 20 Tow	viship 7S Range	341: , ммрм,	Roosevelt County
I. DESIGNATION OF TRANSPORT		S	
Name of Authorized Transporter of Oil Mobil Pipeline Company	y or Condensate	Address (Give address to which approved P. O. Box 900, Dallas, T	
None of Authorized Transporter of Cas	ainghead Gas 🔀 or Dry Gas 🛄	Address (Give address to which approve	d copy of this form is to be sent)
Cities Service Company	Unit Sec. Twp. Rge.	P. O. Box 300, Tulsa, O Is gas actually connected? When	klahoma 74102
If well produces oil or liquids, give location of tanks.	K 20 7S 34E		ugust 10, 1967
	th that from any other lease or pool,	give commingling order number:	None
Designate Type of Completion	Oil Well Gas Well	New Well Workover Deepen	Plug Back   Same Res'v.   Dlif. Res'v.
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
			The base of the second se
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
Perforations			Depth Casing Shoe
TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUSING SIZE	DEPTH SET	SACKS CEMENT
alayan milan dari da da kana ang ang kana ang ang kana ang ang kana pang ang kana kana kana kana kana kana ka			
			,
. TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be c.	fter recovery of total volume of load oil cr	id must be equal to or exceed top allow-
OIL WELL Date First New Oil Run To Tanks	able for this de Date of Test	pin or be for full 24 hours) Producing Method (Flow, ; ump, gas lift,	etc.)
	Tubing Pressure	Cusing Pressure	Choke Size
Length of Test	I uping Presaure	Cusing Freasure	GN070 5.28
Actual Prod. During Test	Oll-Bbls.	Water-Bbls.	Gas-MCF
	<u></u>		
GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bols. Condensate/MMCF	Gravity of Condensate
			-
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Ehut-ia)	Choke Size
1. CERTIFICATE OF COMPLIAN	CE	11	FION COMMISSION
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.		APPROVED	
		BY	
Mayine Signature)		This form is to be filed in compliance with RULE 1104.	
		If this is a request for allowable for a newly drilled or despend well, this form must be accompanied by a tabulation of the deviation	
Senior Production Clerk		tests taken on the well in accord	ance with RULE 111. t be filled out completely for allow-
<i>(Title)</i> January 23, 1973		able on new and recompleted wel	1.
(bate)		Fill out only Bestione I. II. III. and VI for changes of owner, well tame or number or transportes or other such oneage of condition. Separate Forms C-104 must be filed for each pool in multiply	
		Separate Forms C-104 must i completed wells.	of they for excu pool in multiply

JAH2 4 1978 OIL CONTENTATION COMM. HOBBL, N. M.

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