and the second s			
NO. OF COPIES REC	1		
DISTRIBUTION			
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPEL TOR			
PROPATION OF			
C			

4/25/78 (bets)

NEW MEXICO OIL CONSERVATION COMMISSION

Form C+104

	SANTA FE	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-1) Effective 1-1-65		
	U.S.G.S.	AUTHORIZATION TO TRA	- AND ANSPORT OIL AND NATURAL (
	LAND OFFICE	ACTION EXTION TO THE	THE SALE OF THE HAT UNAL	20 NW		
	TRANSPORTER GAS					
	OPEL TOR					
I.	PROPIATION OFFICE Operator					
	Flint Oil & Gas, Inc.					
	Address C/o Oil Reports & Gas Services, Inc., Box 763, Hobbs, N M 88240					
	Reason(s) for filing (Check proper box		Other (Please explain)			
	New Well	Change in Transporter of: Oil Dry Ga	500 bbl testing Change well No.			
	Recompletion Change in Ownership	Casinghead Gas Conder		riom 47 to 41		
	If change of ownership give name					
	and address of previous owner					
H. DESCRIPTION OF WELL AND LEASE Lease Name Well No. Poct Name, Including I			R-10130 ormation Kind of Lease Lease No.			
	Hondo State	1 Chaveroo San		or Fee State above		
	Location B 660	North	ne and 1980 Feet From '	_{The} East		
	Unit Letter ;	Feet From The North Lin	ne andFeet From '	The MADE		
	Line of Section 31 Tox	wnship 78 Range	33E , NMPM, ROOSEY	reit County		
III.	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA	as			
	Name of Authorized Transporter of Oil	or Condensate	Address (Give address to which appro-			
	Mobil Oil Corp. by the Name of Authorized Transporter of Car	trucks singhead Gas or Dry Gas	P. O. Box 900, Dallas, Address (Give address to which appro	ved copy of this form is to be sent)		
			Is any actually connected? Wh	AD		
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. B 31 7S 33E	Is gas actually connected? Wh			
	If this production is commingled wi	th that from any other lease or pool,	give commingling order number:			
IV.	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Restv. Diff. Restv.		
	Designate Type of Completic		Tatal South	P.B.T.D.		
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	F.B.11.D.		
	Elevations (DF, RKB, RT, GR, etc.,	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth		
	Perforations			Depth Casing Shoe		
		TUBING, CASING, AND	D CEMENTING RECORD DEPTH SET	SACKS CEMENT		
	HOLE SIZE	CASING & FOOTING STALE				
V.	TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a	ifter recovery of total volume of load oil	and must be equal to or exceed top allow		
OH, WEIL Date First New Oil Run To Tonks Date of Test Date First New Oil Run To Tonks Date of Test Producing Method (Flow, pump, gas lift, etc.)			ft, etc.)			
		Tubing Pressure	Casing Pressure	Choke Size		
	Length of Tent	Laplid Liese are				
	Actual Prod. During Test	Cil-Bbls.	Water - Hbls.	Gas - MCF		
	Service on a service and the service of the service					
	GAS WELL		Bbls, Condendate/MMCF	Gravity of Condensate		
	Astual Pros. Test-MCF/D	Length of Teut	Bola, Condendate/MMOF	G. G. W. S.		
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Cosing Pressure (Shut-in)	Choke Size		
	The analysis of the first one of the second state of the second st	and the control of th	OIL CONSERVA	A TITUTE OCCUMENTS STON		
Commission have been complied with and that the information given		4 7978 COMMISSION				
		Orig. Signed by BY				
		BY Jerry Sexton				
	Agent (File)		Dist 1, Supv.			
			This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deapened.			
			well, this is a request to knowled by a tabulation of the deviation tests taken on the well in accordance with HULE 111.			
			All sections of this form must be filled out completely for allow			

able on new and recompleted wells.

Fill out only Sections I. II. III, and VI for changes of condition well name or number, or transporter, or other such change of condition beparate Yorks C-104 must be filed for each pool in multiple consisted wells.