	NO. OF COPIES RECEIVED		Protein: when D. S.	Nerris (r) D. A. Beert,
	DISTRIBUTION SANTA FE	NEW MEXICO OIL CONSERVATION COMMISSION Form C-104		
	FILE	REQUEST FOR ALLOWABLE Supersedes Old C-104 and C-11 AND Effective 1-1-65 AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS		
	U.S.G.S.			
	IRANSPORTER OIL			
	OPERATOR			
1.	PRORATION OFFICE			<u></u>
	Add Noon 711, Philips Building, Jossa, Taxas 79760			
	Reason(s) for filing (Check proper bo		Other (Please explain)	CAS MURT NOT BH
	New Well Recompletion	Change in Transporter of: Oil Dry C		3/1/22
	Change in Ownership		ensate	2011 NACHT IS 104070
	If change of ownership give name and address of previous owner	7月13 以目す 長からたか。	4 OW CED IN THE POOL	,
II.	DESCRIPTION OF WELL ANI	D LEASE A PROPERTY DESCRIPTION	IS TOU BE NOT CONCUR	15.06 / 12 11
	Lease Name Sante Ford (Can.)	Well No. Pool Name, Including		
	Location Unit Letter	Feet From The DOPCH	ine and Feet Fr	om The WOOL
	7	ownship 17-5 Bange	35-8 , NMPM, Las	County
TT			······································	County
11.	Name of Authorized Transporter of C		AS Address (Cive address to which ap Box (M), Dollar, Tor	pproved copy of this form is to be sent)
		asinghead Gas 📥 or Dry Gas	Address (Give address to which ap	pproved copy of this form is to be sent)
	If well produces oil or ticuids,	Unit Sec. Twp. Rge,	is gas actually connected?	When the second se
	give location to tanks.	vith that from any other lease or pool		approximately 2=13=12
	COMPLETION DATA	Cil Well Gas Well	New Well Workover Deepen	Plug Back Same Resty. Diff. Resty.
	Designate Type of Complet	ion - (X) Z	Total Depth	
	11-24-71	13-28-71	6900	P.B.T.D.
	Elevations (DF, RKE, RT, GR, etc.) GR 4012'; DF 4623'		Top Oil/Gas Pay	Tubing Depth 869/
	0691-94', 8700-03', 8731-34', 8741-44'			Depth Casing Shoe 8900
	HOLE SIZE	TUBING, CASING, AN CASING & TUBING SIZE	D CEMENTING RECORD	SACKS CEMENT
	-12-1/4-	8-5/8	1795'	Total of 690 at Incor at
	7-7/8*	FY2	8900 ·	
v.	TEST DATA AND REQUEST I	FOR ALLOWABLE (Test must be	after recovery of total volume of load	oil and must be equal to or exceed top allow-
	OIL WELL able for this de Date First New Oil Bun To Tanks Date of Test		epth or be for full 24 hours) Producing Method (Flow, pump, gas lift, etc.)	
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size
	Astual Prog. During Test	Oil-Bbls.	Water-Bbjs.	Gag - MCF
		<i>07</i>	3	94.3
ľ	GAS WELL			
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
/I .	CERTIFICATE OF COMPLIAN	NCE	OIL CONSER	VATION COMMISSION
	I hereby derively that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given		AP.PROVED 19, 19	
	above is true and complete to the best of my knowledge and belief.		BY A James	
	alt - 1	11	TITLE SUPERVIS	ORPOISTRICT I
	M Malle	. J. Pueller	If this is a request for al	in compliance with RULE 1104. lowable for a newly drilled or deepened
	Sentor Recurrety Inglister		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 allow-	
-	1-24-72 (Title)		able on new and recompleted wells. Fill out only Sections I, II, III, and VI for changes of owner,	
	J)	Date)	well name or number, or transp	borter, or other such changes of owner, must be filed for each pool in multiply
			completed wells.	

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