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**NEW MEXICO OIL CONSERVATION COMMISSION**  
**REQUEST FOR ALLOWABLE**  
**AND**  
**AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS**

Form C-104  
 Supersedes Old C-104 and is  
 Effective 1-1-53

Reasons for filing of this report:

New Well  Change in Transporter of: Oil  Dry Gas   
 Change in Location  Gashead Gas  Condensate   
 Change in Transporter

Other (Please explain):

If change of ownership, give name and address of previous owner: Continental Oil Company, Box 200, Santa Fe, N.M.

**II. DESCRIPTION OF WELL AND LEASE**

Well No.	Pool Name, Including Formation	State	Order No.	State	Lease No.
104	ARMED SPRING	N.M.			B-1581
Section	Unit	Feet From The	Line and	Feet	
II	330	South	1650	West	
Section	Township	Range			
36	19S	37E			

**III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS**

Is gas actually being transported?

Address (Give address to which shipped): Max Co., 10000 Santa Fe, N.M.

Is gas actually being transported?

Address (Give address to which shipped): Max Co., 10000 Santa Fe, N.M.

Well produces oil and gas?  or Dry Gas

Section: 35, Township: 29, Range: 37

**IV. COMPLETION DATA**

Designate Type of Completion - (X)  Oil Well  Gas Well  New Well  Workover  Deepening  Re-completing  Other

Date Completed: \_\_\_\_\_ Date Ready to Prod. \_\_\_\_\_ Total Depth: \_\_\_\_\_

Producing Formation: \_\_\_\_\_ Top Gas Flow: \_\_\_\_\_

**TUBING, CASING, AND CEMENTING RECORD**

HOLES IN 25'	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

**V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL** (Test must be after recovery of total volume of fluid and must be at least 24 hours before test is run)

Date of Test	Producing Method (flow, pump, gas lift, etc.)
Flowing Pressure	Casing Pressure
Oil-Bble.	Water-Bble.

**GAS WELL**

Length of Test	Bble. Condensate (MMBtu)
Flowing Pressure (shut-in)	Casing Pressure (shut-in)

**VI. 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.

[Signature]  
 Title: Assistant  
 Date: September 30, 1957

**OIL CONSERVATION COMMISSION**

APPROVED \_\_\_\_\_, 19\_\_\_\_

BY \_\_\_\_\_

TITLE \_\_\_\_\_

This form is to be filed in compliance with RULE 1104.  
 If this is a request for allowable for a newly drilled or deepened 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 allowable on new and recompleted wells.  
 Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter or other such change of condition.  
 Separate Forms C-104 must be filed for each pool in multiply completed wells.