NO. OF COPIES RECEIVED	REQUEST FO	SERVATION COMMISSION OR ALLOWABLE AND SPORT OIL AND NATURAL GAS	Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65
Operator			
Address	s New Mexico	<u> </u>	
Box 460 1465 Reason(s) for filing (Check proper bux)	S New Mexico	SS240 Other (Please explain)	
New We!!	Change in Transporter of:		
Recompletion	Oil Dry Gas Casinghead Gas Condense		
If change of ownership give name			
and address of previous owner			
DESCRIPTION OF WELL AND I	Well No. Pool Name, Including For	mation Kind of Lease	Lease No.
Lease Name WAKERS UNIT	42 Blinchey OIL		ar Fee LC 03/095(6)
	80 Feet From The South Line		EAST
Unit Letter;7			County
Line of Section 27 Tow	mship 20-5 Range 3	<i>У-Е</i> , NMPM,	County
Nome of Authorized Transporter of Oil Nome of Authorized Transporter of Oil Shell Fifel, JU Nome of Authorized Transporter of Cas		MI JIANJ TEX POFFECT Address (Give address to which approved	TVE JANUARY 31, 1977,
WARRES FIRSTeum Skilly OIL Cu		EUVIC NA INTO	GEITI OIL COLLEGE
If well produces oil or liquids, give location of tanks.	6 33 20 38		12-31-76
If this production is commingled wi	th that from any other lease or pool, g		Plug Back Same Res'v. Diff. Res'v.
Designate Type of Completion	On wen dee wee	New Well Workover Deepen	Plug Back Same Res'v. Ditt. Hes'v.
Dete Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
11-1-76 Elevations (DF, RKB, RT, GR, etc.)	12-31-76	7090 Top Oil/Gas Pay	Tubing Depth
2552	BILLARCON CICK GAS	5950	6156
Perforations 5919-33,42,51,5	51015,6028,6040		Depth Casing Shoe
-94/4-22/72/01/2	TUBING, CASING, AND	CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
1214	7	7090	1675
	2318	6156	
V. TEST DATA AND REQUEST F	CORALLOWABLE (Test must be a)	fter recovery of total volume of load oil i	and must be equal to or exceed top allow
OIL WELL	able for this de	p:h or be for full 24 hours) Producing Method (Flow, pump, gas lij	
Date First New Oil Run To Tanks	Date of Test 1-4-77	Pump	
Length of Test 24HR3	Tubing Pressure	Casing Pressure	
Actual Prod. During Test	Oil-Bbla.	Water-Bbls.	Gas-MCF
	. 47		110
GAS WELL			
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Mothod (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
			ATION COMMISSION
"I. CERTIFICATE OF COMPLIA	NCE		1977
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.		APPROVEO	estone
		BY AND STORE	
		TITLE	
10.		1	compliance with RULE 1104. wable for a newly drilled or deepen
B Dilliogue (Signature)		If this is a request for allowable for a hour of the deviation well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.	
br Stop ant		Att sections of this form must be filled out completely for allo	
1-10-77 (Tille)		sole 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	
Nonner (51 USCS (2)	inter sular file	well name or number, or transpo Separate Forms C-104 mu	at be filed for each pool in multi
Non-cr (51 USCS (2)	Nmt"(1)	completed wells.	