- [	NO. OF COPIES RECEIVED			
Ì	DISTRIBUTION			
	SANTA FE			
	FILE			
	U.S.G.S.			
	LAND OFFICE			
	TRANSPORTER	OIL		
	TRANSFORTER	GAS		
	OPERATOR			
	PRORATION OFFICE			

NO. OF COPIES RECEIVED	.*				
DISTRIBUTION	NEW MEXICO OIL CO	ONSERVATION COMMISSION	Form C-104		
SANTA FE		FOR ALLOWABLE	Supersedes Old C-104 and C		
FILE	KEGGEOT	AND	Effective 1-1-65		
U.S.G.S.	AUTHORIZATION TO TRAI	NSPORT OIL AND NATURAL	GAS		
LAND OFFICE	7,0,7,10,7,10,7,10,7,10		9 31 AM '65		
TRANSPORTER OIL		10 TU	2 3T WW .03		
GAS OPERATOR					
PRORATION OFFICE					
Operator	And an Small and Law Administra	•			
Carver Folsi	dation Production Compan	¥			
Address					
€. G. 1888. 9	(K), Tarmit, Term				
Reason(s) for filing (Check proper box)	)	Other (Please explain)			
New Well	Change in Transporter of:	Formerly Hil	1 5-8		
Recompletion	Oil Dry Gas	s 🔛 To Comply with Complexion order			
Change in Ownership	Casinghead Gas Conden	sate			
DESCRIPTION OF WELL AND	LEASE  Lease No. Well No. Pool Nac	me, Including Formation	Kind of Lease State, Federal or Fee		
Location					
1000	Feet From The Karth Line	e andFeet Fro	om The		
Unit Letter;	reet r.om The	- Cana			
Line of Section Tov	waship 37-	, NMPM,	Count		
DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA	S			
Name of Authorized Transporter of Oil	or Condensate	Address (Give address to which ap	proved copy of this form is to be sent)		
Texas-Har Herico Pipe	Take Conferm	Jai, New Nexico	proved sorw of this form is to be sent)		
Name of Authorized Transporter of Cas		Address (Give address to which approved copy of this form is to be sent)			
al Pasc Datural des Co		Is gas actually connected?	When		
If well produces oil or liquids,	Unit Sec. Twp. Rge.	Yes	At Completion		
give location of tanks.	<u> </u>				
If this production is commingled wi	th that from any other lease or pool,	give commingling order number:			
COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back   Same Res'v. Diff. Re		
Designate Type of Completic					
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.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			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a	after recovery of total volume of load	oil and must be equal to or exceed top a		
OIL WELL	able for this de	epth or be for full 24 hours) Producing Method (Flow, pump, ga	s lift. etc.)		
Date First New Oil Run To Tanks	Date of Test	Producing Method (1 tow, pamp, ga			
	Tub/na Danasura	Casing Pressure	Choke Size		
Length of Test	Tubing Pressure	Casing 1 1000 at			
	Oil-Bbls.	Water-Bbls.	Gas-MCF		
Actual Prod. During Test	0.1 22.2				
GAS WELL					
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate		
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size		
	<u> </u>	<u></u>			
. CERTIFICATE OF COMPLIAN	NCE	OIL CONSER	RVATION COMMISSION		
· Charles College On College Manage					
I hereby certify that the rules and	regulations of the Oil Conservation	APPROVED, 19			
Commission have been complied	with and that the information given				
	a heat of my knowledge and helief				
above is true and complete to the	ne best of my knowledge and belief.	BY			
above is true and complete to the	ne best of my knowledge and belief.	BY			
above is true and complete to the	ne best of my knowledge and belief.	TITLE This form is to be filed			

## VI

(Signature) Field Ramger

(Title)

August 14th, 1965

APPROVED_	 	, 19
BY	<del> </del>	

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.