I			,		,	
	NO. OF COPIES RECEIVED	7				
	DISTRIBUTION					
	SANTA FE	I	CONSERVATION COMMISS	SION	Form C-104	
	FILE .	REQUEST FOR ALLOWABLE Supersedes Old C-104 and C-11 Effective 1-1-65				
	U.S.G.S.	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS				
	LAND OFFICE					
	TRANSPORTER OIL					
	GAS					
	OPERATOR					
1.	PRORATION OFFICE					
	Operator Day To the Market Day Control of the Contr					
	Address C. Address C. Andrews C. Christiania					
	Address (C. Bal 460, Hafile, new Trupico 88240					
	Reason(s) for filing (Check proper box)  Other (Please explain)					
	New Well	Change in Transporter of:	Offier (Trease ex	.pram)		
	Recompletion	Oil Dry G	as			
	Change in Ownership		ensate 🗍			
If change of ownership give name and address of previous owner						
	and address of previous owner	iduless of previous owner				
II.	DESCRIPTION OF WELL AND					
	Lease Name	Well No. Pool Name, Including S		ind of Lease	Lease No.	
	McCalles ter A	Searborough.	Tentes 7- Kereral St	ate, Federal or F	ee Le-030167(a)	
Location					<i>-</i>	
	Unit Letter 77; 33	10 Feet From The 71/11/2 LI	ne and 🔰 💢	Feet From The	Escal	
	20/ -	ownship 365 Range	215	£		
	Line of Section A 7 To	ownship A 6 5 Range	JEST, NMPM,	/) K.a.	County	
311	DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL G	48			
	Name of Authorized Transporter of O			hich approved c	opy of this form is to be sent)	
	Abill Hast I	1012/12	Sect 1916,	Midle	nel 1 Del 60 1	
	Name of Authorized Transporter of Co	singhead Gas or Dry Gas	Address (Give address to L	hich approved c	opy of this form is to be sent)	
	If well produces oil or liquids,	Univ Sec. Twp. Rge.	Is gas actually connected?	When		
	give location of tanks. La 34 36 70					
	If this production is commingled w	ith that from any other lease or pool,	give commingling order nu	ımber:		
IV.	COMPLETION DATA	Oil Well Gas Well	New Well Workover	Deepen Plu	ig Back   Same Resty. Diff. Resty.	
	Designate Type of Completi		Morrose:	Deepen Fit	Jame Nes Dill. Nes	
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.1	3.T.D.	
	12-2-70	12-19-70	Total Depth			
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tu	bing Depth	
	2940 DF	Name of Producing Formation			3080	
	Perforations			De	pth Casing Shoe	
	2966-30	223		,	3236	
		TUBING, CASING, AN	D CEMENTING RECORD	<del></del>		
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		SACKS CEMENT	
	12-14	85,1	3236		350 01 charte"	
	7.73	2.76" the	3080		100 of Cironic"	
		1 5. 15 119	3000			
•,	TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allow					
٧.	TEST DATA AND REQUEST FOIL WELL		ifter recovery of total volume epth or be for full 24 hours)	oj toda oti end #	usi de equal to or exceed top allow-	
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, p	ump, gas lift, etc	:.)	
	12 -16-70	/2-2/-70 Tubing Pressure	Casing Pressure			
		Tubing Pressure	Casing Pressure	Ch	oke Size	
	Length of Test	Oil-Bbls.	Water-Bbls.		704	
	Actual Prod. During Test	Oil-Bbls.	Water-Bbls.		s-MCF	
		129 BO	1811		nin-	
	CAC HELY					
	GAS WELL	Length of Text	Bbls. Condensate/MMCF	16-2	rvity of Condensate	
	Actual Prod. Test-MCF/D	Length of Test	phis. Condensate/MMCF	Gro	THIT OF CONGENERIE	
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in	chi	oke Size	
	reating wethou (pitot, ouck pr.)		January Constitution	, Cin	-: <del></del>	
¶.7¥	CERTIFICATE OF COURT IS	ICE	011 00	NSERVATIO	IN COMMISSION	
v 1.	CERTIFICATE OF COMPLIANCE		() (1) (1) (1) (1) (1) (1) (1) (1) (1) (	NSERVATION OF THE	N COMMISSION	
					, 19	
	I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given			1/2:		
	above is true and complete to th	e best of my knowledge and belief.	BY		<u> </u>	

This form is to be filed in compliance with RULE 1104.

CONTRACT DESCRIPTION

TITLE.

(Signature)

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.