	n. Or coming RECE	LIVES				
	DISTRIBUTIO	BUTION				
	SANTA FE					
	FILE					
	U.S.C.S.					
	LAND OFFICE					
	TRANSPORTER	OIL				
	TRANSFORTER	GAS				
1.	OPERATOR					
	PRORATION OFFICE					
	Operator &M&Qi					
	Address	2/	-	 ئرچ		

EW MEXICO OIL CONSERVATION COMMISSI

SANTA FE	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-11 Effective 1-1-55	
FILE U.S.C.S.	AUTHODIZATION TO TO	AND	Effective 1-1-65	
LAND OFFICE	AUTHORIZATION TO TRA	ANSPORT OIL AND NATURAL	GAS	
TRANSPORTER OIL				
GAS				
PROPATION OFFICE	 			
Operator (IN) 1 /	7			
JUNGU	el Co	2		
Address	267 Midla	4 Deel 297	102	
Reason(s) for filing (Check proper		Other (Please explain)		
New Well	Change in Transporter of:		nection date with	
Recompletion Change to Ownership	Oil Dry Go Casinghead Gas Conder	= LI Taso Nat	ural Gas Company	
Change in Ownership	Cusingheur Gus Contact			
If change of ownership give nar and address of previous owner				
- -		el R-6328		
DESCRIPTION OF WELL A Lease Name	ND LEASE Well No. Pool Name, in Ming F	ormation Kind of Lea	se Lease No.	
Wilson 9 Federa		6 R-6169 State, Feder	olor Fee Federal NM1864	
Location				
Unit Letter;	660 Feet From The West Lir	ne and 1980 Feet From	The South	
Line of Section 9	Township 26S Range 3	6E , NMPM; Le	a County	
Eme of occurs.				
DESIGNATION OF TRANSP	ORTER OF OIL AND NATURAL GA	Address (Give address to which appr	oved conv of this form is to be sent!	
Name of Authorized Transporter o	f Oil or Condensate	P.O. Box 2297, M		
Basin, Inc. Name of Authorized Transporter o	f Casinghead Gas 😿 💮 or Dry Gas 🦳	Address (Give address to which appr	oved copy of this form is to be sent)	
El Paso Natural		P.O. Box 1492, E	1 Paso, Texas 79978	
If well produces oil or liquids,	Unit Sec. Twp. Rge.		hen 7 F 70	
give location of tanks.	L 9 26 \$; 36E		7 - 5-79	
If this production is commingled COMPLETION DATA	d with that from any other lease or pool,	give commingling order number:		
	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Resty. Diff. Resty	
Designate Type of Comp	<u>_ </u>	X Total Depth	P.B.T.D.	
Date Spudded	Date Compl. Ready to Prod. $5-7-79$	3730 '	3695'	
4-4-79 Elevations (DF, RKB, RT, GR, et		Top Cil/Gas Pay	Tubing Depth	
2968'GR	Yates	3360'	3359'	
Perforations			Depth Casing Shoe	
3360-3673	TURING CASING AN	D CEMENTING RECORD	3730'	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
12-1/4"	8-5/8'' 5-1/2''	1465 '	1150	
7-7/8"		3730'	450	
	2-3/8"	3359'		
TEST DATA AND REQUES	T FOR ALLOWABLE (Test must be a	after recovery of total volume of load oi	l and must be equal to or exceed top allou	
OIL WELL	able for this de	epth or be jor juil 24 hours)		
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas	iifi, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	Gas - MCF	
CAC WELL				
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	
	ANGE	OIL CONSERV	ATION COMMISSION	
CERTIFICATE OF COMPLI	ANUE		4 U 1979 . 19	
hereby certify that the rules	and regulations of the Oil Conservation			
Commission have been compli	ed with and that the information given the best of my knowledge and belief.	BY Orig. Signed by Jerry Sexton		
\ \frac{1}{2}		TITLE Diet 1, Supv		
Kill A. A. alm.	/ Retty A Gildon		compliance with RULE 1104.	
uty a. succen	Betty A. Gildon 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		
Regulator	y Clerk	tests taken on the well in acc	ordance with RULE 111. sust be filled out completely for allow	
	(Title)	able on new and recompleted w	vella.	
August 14, 19	79	Fill out only Sections I.	II. III, and VI for changes of owner rter, or other such change of condition	
	(Date)	Separate Forms C-104 mu	st be filed for each pool in muitipl	
and the same of th		completed wells.		