	e V		na dina kana dan dika kana kana kana. Ang		
		REQUEST	UNSERVATION MISSION FOR ALLOWABLE AND	Form C -104 Supersedes Old C-104 and C-110 Effective 1-1-65	
1.	U.S.G.S. AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS				
	IRANSPORTER OIL		RECEIVED BY		
	GAS V OPERATOR PRORATION OFFICE		MAY 26 1987		
	Operator MEWBOURNE OIL COMPANY O. C. D.				
	Address P. O. BOX 7698, TYLER, TEXAS 75711				
	Reason(s) for filing (Check proper box) Other (Please explain) New Well Change in Transporter of:				
	Recompletion Oil Dry Gas X Change in Ownership Casinghead Gas Condensate				
	If change of ownership give name and address of previous owner			~	
11.	DESCRIPTION OF WELL AND LEASE. Well No.; Pool Name, Including Formation Kind of Lease Lease No.				
	Lease Name STATE ''B'' ''COM''	Well No. Pool Name, mereating to	ARY ATOKA State, Federa	al or Fee STATE L-322	
	Unit Letter <u>B</u> ; <u>660</u> Feet From The <u>North</u> Line and <u>1980</u> Feet From The <u>East</u>				
	Line of Section 33 Tow	mahip 19 South Range 2	5 East , NMPM,	Eddy County	
111.	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA	S Address (Give address to which appro	oved copy of this form is to be sent)	
	Phillips Petroleum Company		4001 Pembrook, Odessa, Texas 79761 Address (Give address to which approved copy of this form is to be sent)		
	Nome of Authorized Transporter of Casinghead Gas or Dry Gas XX Sunterra Gas Gathering Company		P.O.Box 26400, Albuquerque, N.M. 87125		
	If well produces oil or liquids,	Unit Sec. Twp. P.ge. B 33 198 25E	Is gas actually connected? When Yes	6/11/75	
	If this production is commingled with that from any other lease or pool, give commingling order number:				
IV.	COMPLETION DATA Resignate Type of Completio	on - (X) Oil Well Gas Well X	New Well Workover Deepen	Plug Back Same Restv. Diff. Restv.	
	Date Spudded	Date Compl. Ready to Prod. 5/23/74	Total Depth 9451 '	Р.В.Т.D. 9107 '	
	1/15/74 Elevations (DF, RKB, RT, CR, etc.) 3472' GR	Name of Producing Formation ATOKA	Top Oil/Gas Pay 8877 '	Tubing Depth 8761 '	
	3472 GR Perforations 8877' - 888			Depth Casing Shoe	
	TUBING, CASING, AND CEMENTING RECORD				
	HOLESIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
	17-1/2"	12-8/4"	1.214'	600	
	11"	8-5/8"	9.451'	500	
	7-7/8''	0 2/911	8 761'		
v.	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-				
ĺ	OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas 1	ift, etc.) 5-29-87 cha GT: GHM	
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
	Actual Prod. During Test	Oll Bhis.	Water - Bbls.	Gas-MCF	
		<u></u>			
1	GAS WELL Actual Fred, TeelettCF/D	Longth of Test	Bbls. Condenscie/MMCF	Gravity of Condenhate	
	Testing Kielhod (pitot, back pr.)	Tubing Pressure (Shut-in)	Cosing Pressure (Shut-in)	Choke Size	
) VI.	CERTIFICATE OF COMPLIANO	TIFICATE OF COMPLIANCE OIL CONSERVATION COMMISSIO			
	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 beat of my knowledge and belief.		APPROVED MAY 2 9 1987, 19		
			BYOriginal Signed By Mike Williams		
	\bigcirc		TITLE Oil & Gas Inspector		
	Daylow Thompson		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 allow- able on new and recompleted wells. Fill out only Sections I, II, III, and VI for changes of owner,		
	Engineering Operations Secretary				
	May 20, 1987	(e)	well name or number, or transport Separate Forms C-104 must	Fill out only Sections 1, 11, 12, and such change of condition. 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.	
			a completed weight		