i			ı	
DISTRIBUTION				
SANTA FE		1		
FILE		1	4	
U.S.G.S.				
LAND OFFICE				
IRANSPORTER	OIL			
	GAS	1,		
OPERATOR		17		
PRORATION OFFICE				
Operator Monsanto Compa				
Address 1330 Midla	nd Na	tio	nal	
Reason(s) for filing	(Check )	proper	box)	

## NEW MEXICO OIL CONSERVATION COM SION

Form C-104

FILE /		FOR ALLOWABLE	Supersedes Old C-104 and C-1. Effective 1-1-65		
U.S.G.S.	AUTHORIZATION TO TR	AND ANSPORT OIL AND NATURAL			
LAND OFFICE	AUTHORIZATION TO TR	ANSPURT OIL AND NATURAL	GAS		
IRANSPORTER OIL /					
GAS 1,		2 3 f ()			
OPERATOR /		المراجع المحاربة			
PRORATION OFFICE Operator	ARTS	SIE OFFICE	·		
Monsanto Co	mpany /	* .			
Address					
1330 Midland Natio	nal Bank Tower, Midland, T	exas 79701			
Reason(s) for filing (Check proper	boxj	Other (Please explain)			
New Well	Change in Transporter of:	F77:	n Union Gas Company's		
Recompletion	Oil Dry G	(m)	mpany of New Mexico		
Change in Ownership	Casinghead Gas Conde	insule []			
If change of ownership give nar					
and address of previous owner.					
DESCRIPTION OF WELL A	ND LEASE				
Lease Name	Well No. Pool Name, Including F	l			
Burton Flat Deep Un	it   11   Burton Flat	- Morrow	al or Fee Fee		
_	660 Feet From The North Lin	ne and 1980 Feet From	The East		
Onit Letter;	Feet Flom The	ne did reet rioni	116 13434		
Line of Section 27	Township 20S Range 2	8E , NMPM, Edo	d <b>y</b> County		
		• •			
DESIGNATION OF TRANSP Name of Authorized Transporter of	FORTER OF OIL AND NATURAL GA	AS Address (Give address to which appro	oved copy of this form is to be sent)		
		PO Box 1183, Houston,	,		
The Permian Corp. Name of Authorized Transporter o	f Casinghead Gas or Dry Gas X	Address (Give address to which appro			
<b>*See</b> be	low				
If well produces oil or liquids,	Unit Sec. Twp. P.ge.	· ·	hen GCNM 11/4/74;		
give location of tanks.	B 27 20S 28E	Yes '	TW 6/6/75 LLano 3/19/75		
	d with that from any other lease or pool,	give commingling order number:	Blatto 3/1//3 (		
COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back   Same Resty, Diff. Rest		
Designate Type of Comp	letion – (X)				
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
Elevations (DF, RKB, RT, GR, et	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth		
Perforations		A A A A A A A A A A A A A A A A A A A	Depth Casing Shoe		
, chorano		,	market and the second		
<u> </u>	TUBING, CASING, AN	D CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
TEST DATA AND REQUES	T FOR ALLOWABLE (Test must be	after necovery of total volume of load of	l and must be equal to or exceed top allo		
OIL WELL	able for this d	lepth or be for full 24 hours)			
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas	lift, etc.)		
Langth of Test	Tubing Pressure	Casing Pisssurs	Choice Size		
Faudtu St. ( aat					
Actual Prog. During Test	Q11-Bbis.	· Water-Bhie.	Ga*-MCF		
		<u> </u>			
GAS WELL		I Byla Cardanana AB/CE	Gravity of Condensate		
Actual Prod. Tost-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate		
Testing Method (pitot, back pr.)	Tubing Fressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size		
realized Marinos (prior) tack proj					
CERTIFICATE OF COMPL	IANCE	OIL CONSERV	ATION COMMISSION		
January 10 in a Grand M.	-	CED 1 0 107	6		
hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given		APPROVED SLF 10 151	APPROVED SEP 1 0 1976, 19		
"ammission have been compli	ied with and that the information given of the best of my knowledge and belief.		Tresset		
TITLE SUPERVISOR, DISTRICT IL		RICE II.			
	This form is to be filed in compliance with R				
D. S. Tipton (Signature)		I was the form must be accome	If this is a request for allowable for a newly drilled or deepene well, this form must be accompanied by a tabulation of the deviation		
tests taken on the well in accordance wi		ordance with RULE 111.			
Regional Production Engineer  (Title)  All sections of this form must be filled on able on new and recompleted wells.  Fill out only Sections I. II. III. and VI		ust be filled out completely for allowells.			
		Fill out only Sections I.	II. III. and VI for changes of owner		
	(Date)	well name or number, or transpo	orter, or other such change of condition		
as Company of New Me Bldo Dallas Texas	xico, First International	Separate Forms C-104 mu	ist be filed for each pool in multi		

\*Gas Company of New Mexico, First International
Bldg., Dallas, Texas 75270
Llano, Inc. PO Drawer 1320, Hobbs, New Mexico 88240