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	LAND OFFICE				
	TRANSPORTER OIL				
	GAS				
	OPERATOR				
I.	PRORATION OFFICE				
	Southern Union	l roduct	ion		
	Address . dox 806,	. arning	ton		
	Reason(s) for filing (Check p	roper box)			
	New Well		С		
	Recompletion		С		
	Change in Ownership		С		
11.	If change of ownership give and address of previous ow DESCRIPTION OF WEL	ner	EASI		
	Lease Name Jicagilla 42,4		V		
	Location	11,50			
	Unit Letter	!	F		
	Line of Section 23	Towns	hip f		
III.	DESIGNATION OF TRA	NSPORTE	R O		
	Hera Mercico Tanka	ers, 10,	•		
	Name of Authorized Transpor				
	If well produces oil or liquids give location of tanks.	s, Ü	Init		
IV.	If this production is commingled with th COMPLETION DATA				
	COMPLETION DATA				

(Date)

	SANTA FE / FILE / SANTA FE / SANT	REQUEST	CONSERVATION COMMISSION FOR ALLOWABLE AND ANSPORT OIL AND NATURA	Form C-104 Supersedes Old C-104 and C-11 Effective 1-1-55			
I.	PRORATION OFFICE Operator Operator Operator						
	Address						
	2 dox 806, armington, Hew Posico 87501						
	Reason(s) for filing (Check proper bo.		Other (Please explain)				
	Recompletion Change in Ownership	Change in Transporter of: Cil Dry Go Casinghead Gas Conde					
	If change of ownership give name and address of previous owner						
11.	DESCRIPTION OF WELL AND	LEASE					
	Lease Name Jicagilla 424	Well No. Pool Name, Including F	!	ease Lease No. deral or Fee Salor 1 153			
	Unit Letter 11.5	Feet From The Lir	ne andFeet Fr	om Thest			
	_	ownship 20 DOTth Range 3		io As riba County			
III.	DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL GA	AS				
	Name of Authorized Transporter of Ot	1 or Condensate	Address (Give address to which ap	pproved copy of this form is to be sent)			
	Mame or Authorized Transporter of Co	10. rlateau, Inc. 90.	Address (Give address to which ar	Oproved copy of this form is to be sent)			
	Jouthern Union Las	oubsili.	•	r, callas, Toxas 75001			
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge.	Is gas actually connected?	When			
IV.	If this production is commingled win COMPLETION DATA	ith that from any other lease or pool,	give commingling order number:				
	Designate Type of Completi	on - (X)	New Well Workover Deepen	Plug Back Same Resty. Ditf. Resty.			
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.			
	Day 19, 1967	June 22, 1967	726	7 928			
	Elevations (DF, RKB, RT, GR, etc., 5873	Name of Producing Formation	Top Cil/Gas Pay	Tubing Depth			
	Perforations	Comment and Comment of	1100	7020 Depth Casing Shoe			
	7700-7872 TUBING, CASING, AND CEMENTING RECORD						
	HOLESIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT			
	15#	10-3/1	302 At.	975			
	9-7/8"	7-5/8"	5750 ft.	250 cm. Ct.			
	6-3/ \$\frac{1}{2}^{\text{T}}	5-1/2"	7965 it.	750 m. ft.			
v.	TEST DATA AND REQUEST E	OR ALLOWABLE (Test must be a	7628 ft.	oil and must be equal to or exceed top allow-			
	OIL WELL Date First New Oil Run To Tanks	able for this de	prth or be for full 24 hours) Producing Method (Flow, pump, ga.				
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size			
	Actual Prod. During Test	Oil-Bbis.	Water-Bbls.	Gods - MCF			
,	GAS WELL			14.500			
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Grafity of Gondenagte			
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size			
[Dack Pressure	17/ ₁ §	Packer	3.10			
	CERTIFICATE OF COMPLIANCE Thereby 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 best of my knowledge and belief. **Construction** Conservation** **Construction** Conservation** **Construction** **		OIL CONSERVATION COMMISSION SEP 27 1967				
			O initial Signed by	y Emery C. Arnold PERVISOR DIST: #8			
			TITLE				
	GILBERT D. NOLAND, JR.		This form is to be filed in compliance with RULE 1104.				
	ilbert). Noland, Sp	ature)	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.				
	Filling apporintance	All sections of this form must be filled out completely for allows					
	September 25, 1967 (Ti	,	able 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.