1	NO. SF COMES SECT	8					
j	DISTRIBUTIO						
	SANTA FE	ANTA FE					
	FILE		1	س			
	U.S.G.S.						
	LAND OFFICE						
1.	TRANSPORTER	OIL	1				
	INANGPORTER	GAS	/				
	OPERATOR	4					
	PRORATION OF						
-	Operator Wynn Oil Compan						
	Address						

	SANTA FE / / / / / / / / / / / / / / / / / /	AND							
1.	TRANSPORTER OIL / GAS / OPERATOR								
	Wynn Oil Compan	у							
	Suite 220, 3303 Lee Parkway Dallas, Texas 75219  Reason(s) for filing (Check proper box)  Other (Please explain)								
New Well   X									
	Change in Ownership	Casinghead	H	77 (					
	If change of ownership give name and address of previous owner	<del></del>							
II.	ESCRIPTION OF WELL AND LEASE.  Lease Name Well No. Pool Name, including Formation Kind of Lease No.								
	Largo Federal	3	Blanco Mes		State, Federal or I	NN 010/02			
	Unit Letter A : 790 Feet From The east Line and 790 Feet From The north								
	Line of Section 14 Tow	mship 27N	Range 81	<b>М</b> и , мм	<sub>PM,</sub> San Jua	n County			
	DESIGNATION OF TRANSPORT	reporati	AND NATURAL GA	s					
111.	Name of Authorized Transporter of Oil	or Cor	ndensate X	Address (Give addres		opy of this form is to be sent)			
	Plateau, Inc.	inghead Gas	or Dry Gas 🔀	P.O. BOX Address (Give address	180 Farming s to which approved o	ton, New Mexico opy of this form is to be sent)			
	El Paso Natu	cal Gas C				ton, New Mexico			
	If well produces oil or liquids, que location of tanks.  Unit Sec. Twp. Rge. Is gas actually connected? When NO								
IV.	If this production is commingled with that from any other lease or pool, give commingling order number:  COMPLETION DATA Oil Well Gas Well New Well Workover Deepen Plug Back Same Res've								
	Designate Type of Completion	$\mathbf{n} = (\mathbf{X})$	Well   Gas Well   X	New Well Workove	PI	ug Back   Same Res'v.   Diff. Res'v.			
	Date Spudded 8-3-72	Date Compl. Re		Total Depth 5604	P.	в.т.р. 5589			
	Elevations (DF, RKB, RT, GR, etc.)		-17-73	Top Oil/Gas Pay	Tu	ibing Depth			
	6652 GR Perforations 4610-15, 46	Mesav	08-18.5080-	4610 86. 4942 <b>-</b> 52	De	5413  epth Casing Shoe			
	4987-89,5225-28, 523 5385-87, 5411-13	37-39, 52 TL	290-5304, 53 JBING, CASING, AND	14-24, 5368-69, 500 CEMENTING RECORD					
	HOLE SIZE 12-1/4			DEPTH SET		SACKS CEMENT			
	6-3/4		/2	5604		516			
v.	TEST DATA AND REQUEST FOR ALLOWABLE  (Test must be after recovery of total volume of load oil and must be equal to receed top allowable for this depth or be for full 24 hours)  Producing Method (Flow, pump, gas lift, etc.)								
	Date First New Oil Run To Tanks	Date of Test		Producing Method (F	tow, pump, gas sept, et	" \ S[PMAED /			
	Length of Test	Tubing Pressur	8	Casing Pressure	CI	FER 1 5 1973			
	Actual Prod. During Test	Oil-Bhls.	<u> </u>	Water - Bbls.	G	MCF			
					OIL CON COM				
	GAS WELL			,					
	Actual Prod. Test-MCF/D 1613	Length of Test 3 hr		Bbis. Condensate/M	MCF G	ravity of Condensate			
	Testing Method (pitot, back pr.)	Tubing Pressur	• (shut-in)	Casing Pressure (S)	out-in) C	hoke Size			
	Back Pressure	<del></del>	L19	881	CONSERVATION	3/4			
VI.	CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION  APR 2 5 1973						
	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 best of my knowledge and belief.		APPROVED APR 25 1975 . 19 19 BY						
	Operator			TITLE SUPERVISOR DIST. #5					
				This form is to be filed in compliance with RULE 1104.  If this is a request for allowable for a newly drilled or despened 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-					
	2-7-73 (Ti	ile)		able on new and recompleted wells.					
	(Date)			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.					