NO. OF COPIES REC	EIVED	1	
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SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
THAT ON ER	GAS		
OPERATOR			
PRORATION OF	ICE		

Supersedes Old C-104 and C-110

NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE Effective 1-1-65 AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS Operator MWJ PRODUCING COMPANY Address 413 FIRST NATIONAL BANK BUILDING, MIDLAND, TEXAS 79701 Reason(s) for filing (Check proper box) Other (Please explain) New Well Change in Transporter of: Change of lease name from Huber State Recompletion OIL Dry Gas to Huber State Com Change in Ownership Casinghead Gas Condensate If change of ownership give name and address of previous owner ___ II. DESCRIPTION OF WELL AND LEASE
| Well No. | Pool Name, Including Formation Kind of Lease Lease No. Huber State Com 1 West Mescalero Penn State, Federal or Fee State K-965 Location ; 1980 Feet From The South Line and 1980 Unit Letter_ K Feet From The West Line of Section 33 Township 10 South Range 32 East , NMPM, Lea County II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

or Condensate
Address (Give address to which approved copy of this form is to be sent) Admiral Crude Oil Corp.
Name of Authorized Transporter of Casinghead Gas _____ or Dry Gas Box 1713, V & J Tower, Midland, Texas
Address (Give address to which approved copy of this form is to be sent) Twr. Unit Sec. Is gas actually connected? When If well produces oil or liquids, give location of tanks. 33 10S <u> 32E</u> If this production is commingled with that from any other lease cr pool, give commingling order number: V. COMPLETION DATA Oil Well Gas Well New Well Workover Plug Back | Same Res'v. Diff. Res'v. Designate Type of Completion - (X) Date Spudded Date Compl. Ready to Prod. Total Depth P.B.T.D. Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation Top Oil/Gas Pay Tubing Depth Depth Casing Shoe Perforations TUBING, CASING, AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours) V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL Date First New Oil Run To Tanks Producing Method (Flow, pump, gas lift, etc.) Date of Test Tubing Pressure Casing Pressure Choke Size Length of Test Actual Prod. During Test Oil-Bble. Water - Bbls. Gas - MCF 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 **I. CERTIFICATE OF COMPLIANCE** OIL CONSERVATION COMMISSION APPROVED_ 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. -tin Tur 127. BY..... TITLE .. This form is to be filed in compliance with RULE 1104. Bel- Cily 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 allowable on new and recompleted wells. Agent (Title) November 16, 1970 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.

Senarate Forms C-104 must be filed for each pool in multiply

(Date)







Job separation sheet

NO. OF COPIES RECEIVE	VED							Form C-	-105
DISTRIBUTION	4						_	Revised	1-1-65
SANTA FE				MEXICO OIL CO				1	Type of Lease
FILE U.S.G.S.			WELL COMPLI	ETION OR REC	COMPLETIC	N REPORT	AND LOG	State X	& Gas Lease No.
LAND OFFICE								K-2603	& Gas Fease No.
OPERATOR		+					į	777777	mmmm
<u> </u>									
la. TYPE OF WELL								7. Unit Agre	eement Name
		OIL	X GAS	DRY					
b. TYPE OF COMPLE	ETION ORK							8. Farm or L	_ease Name
	ER	DEEP	EN PLUG BACK	DIFF. RESVR.	OTHER			HUBER S	TATE
MWJ PRODUCIN	C COMP	ΔΝΨ					}	9. Well No.	
3. Address of Operator		WIAT.	· · · · · · · · · · · · · · · · · · ·					1 Field on	nd Pool, or Wildca:
413 FIRST NA	TIONAL	BANI	K BUILDING.	MIDLAND. T	EXAS 797	01		WILDCAT	
4. Location of Well								ZZZZZZ	ar karaina
								411111	
UNIT LETTER K	LOCA	TED	1980 FEET F	RON THE _ Sout	h LINE AND	1980	FEET FROM		<i>/////</i>
					MILL	HIVIII:		12. County	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
THE West LINE OF	sec. 3	3 .	TWP. 105 RG	E. 32E NMP	$\sim \Lambda 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 $			LEA	
					1			R, etc.) 19.	Elev. Cashinghead
8-22-70	9-15	- 70	9-26 ag Back T.D.	<u>5-70</u>		350 KB w 23. Interv			4339
				22. If Multip Many	pie Compl., Ho	w 23. Interv Drille	als , Rotary d By ,	Tools	Cable Tools
9150 24. Producing Interval(e) of this	910)4		_no	<u></u>	→ 0-91		
24. I rodderng intervar	s), or this	compre	tion = Top, Botton	a, rvaine				2	 Was Directional Survey Made
Bough "C"	0770	0700							
Bough "C" 26. Type Electric and (Officer Logs	0/00 s Run				·		27 W	no as Well Cored
Laterolog,			lr.					27. "	
28.	1111 C	.,,,		SING RECORD (Re	ecort all strings	s set in well)			no
CASING SIZE	WEIG	HT LB	·	····	OLE SIZE	·	NTING RECO	RD	AMOUNT PULLED
13 3/8		48	415	1-	7 1/2	400			AMOUNTIOLES
8 5/8	24	& 32	3502			300			
5 1/2	_	17.	9142	7	7/8	200			
				<u></u>					
29.			INER RECORD	T	1	30.		JBING RECO)RD
SIZE	TOI		воттом	SACKS CEMENT	SCREEN	SIZE		TH SET	PACKER SET
				 		2 3/8	8600	 	8600
31. Perforation Record	(Interval.	size an	l d number)		32.	ACID SHOT E	DACTURE O	CHENT COL	\
	,		- ,,			ACID, SHOT, F			
8778 - 8788 (3	l2 hole	es)			8778-878			1. 15%	D MATERIAL USED
							GOOD BE	<u>لم ۵/بيلم و لم.</u>	NE acro
33.		.,			DUCTION				
Date First Production 9–26–70		Swa		ving, gas lift, pum	ping - Size and	l type pump)		1	(Prod. or Shut-in)
Date of Test	Hours T			=3-31 F2 -				Produc	
9-26-70	6	cated	Choke Size	Frod'n. For Test Period	011 — Вы.	Gas - MCI	1	- Bbl.	Gas—Oil Flatio
Flow Tubing Press.	Casing	Pressur	e Calculated 24	- Cil - Bbl.	Gas - M		2 90 ater – Bbl.		940:1 Gravity - API (Corr.)
	pkr.		Hour Rate	32	30	"	360	41	Maini - Ari (00/1.)
34. Disposition of Gas			el, vented, etc.)	<u>- L</u>		L		Witnessed By	/
none							1	L. Schla	
35. List of Attachments			* · · · · · · · · · · · · · · · · · · ·						
Electric									
36. I hereby certify that	the inform	nation s	hown on both side	s of this form is tr	ue and complet	e to the best of	my knowledg	e and belief.	
	1/2	11	2 1 F		1/0				
SIGNED	1Ch	<u> W</u>	Uh-	TITLE	11/	· · · · · · · · · · · · · · · · · · ·	····	DATE OC	ctober 7, 1970

NSTRUCTIONS

This form is to be filed with the appropriate District Office of the Commission not later non-20 days after the completion of any newly-drilled or deepened well. It shall be accompanied by one copy of all restricted and radio-activity logs run on the well and a summary of all special tests conducted, including drill stem tests. All depths reported shall be measured depths in the case of directionally drilled wells, true vertical depths shall also be reported. For multiple completions, Items 30 through 34 shall be reported for each zone. The form is to be filed in quintuplicate except on state land, where six copies are required. See Rule 1105.

INDICATE FORMATION TOPS IN CONFORMANCE WITH GEOGR/ PHICAL SECTION OF STATE

Southeastern New Mexico					Northwestern New Mexico				
т.	Anhy 1504	T.	Canyon	т.	Ojo Alamo	_ т.	Penn. "B",		
Т.							Penn. "C"		
B.	Salt						Penn. "D"		
Т.	Yates 2207	Т.	Miss	Т.	Cluf House	_ Т.	Leadville		
Т.	7 Rivers 2338	T.	Devonian	т.	Menefee	_ T.	, Madison		
T.	Queen	T.	Silurian	Т.	Point Lookou	_ т.	Elbert		
							McCracken		
T.	San Andres 3457	Т.	Simpson	т.	Gadup	_ Т.	Ignacio Quzte		
Т.	Glorieta 4867	т.	McKee	Ba	se Greenhorn	_ T.	Granite		
T.	Paddock	T.	Ellenburger	Т.	Dagota	_ Т.			
Т.	Blinebry	т.	Gr. Wash	Т.	Morrison	_ т.			
Ţ.	Tubb6300	т.	Granite	т.	To iiito	_ т.			
T.									
T.	Abo7136	т.	Bone Springs	T.	Wingate	_ Т.			
T.									
Т.	Penn.	Т.		Т.	Pennian	_ Т.			

FORMATION RECORD Attach additional sheets if necessary)

____T. Penn. "A"_____

T Cisco (Bough C) 8708 T.

From	То	Thickness in Feet	Formation	From	То	Thickness in Feet	Formation
rf	1504	1504	Post Ochoan				
04	1562	58	Rustler				·
62	2207	645	Salt				
07	2338	31	Yates	: 	i I		
38	3457	1119	Seven Rivers, Queen, Grayb	urg	}		
57	4867	1410	San Andres				
67	6300	1433	Glorieta - Leonard				
00	7136	836	Tubb				
36	8312	1176	Abo				i i
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