	o, or cor,	 .	1		ı		
	DISTRIBUTION						
	SANTA FE						
	FILE						
!	J.S.G.S.				AUTHOR		
	LAND OFFICE					7.011101	
	TRANSPORTER	OIL					
	I TRANSFORTER	GAS					
	OPERATOR						
ı.	PRORATION OFFICE						
	TOM L. INGRAM						
	P.O. B ox					11,	New
	Reason(s) for filing (Check proper box)						
ı	New Well	\sqsubseteq				Chan	ge in T
	Recompletion					Oil	
	Change in Ownership					Casi	nghead

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-104 110

	FILE	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-1 Effective 1-1-65		
	J.S.G.S.	AUTHORIZATION TO TR	AND ANSPORT OIL AND NATURAL	· · · ·		
	LAND OFFICE	- NOTHICKIZATION TO TK	AND ORT OIL AND NATURAL	GAS		
	TRANSPORTER OIL GAS					
1.						
	TOM L. INGRAM					
	Address	oswell, New Mexico 8820	1			
	Reason(s) for filing (Check proper bo					
	New Well	Change in Transporter of:	Other (Please explain)			
	Recompletion	Oil 🗓 Dry G	as 🔲			
	Change in Ownership	Casinghead Gas Conde	ensate			
	If change of ownership give name and address of previous owner					
H.	DESCRIPTION OF WELL AND	LEASE Well No. Pool Name, including F	Cornetton			
	Light		dres Associated State, Federal	Federal Lease No. **		
	Location . 19	80 Feet From The South	ne and 660 Feet From	East		
	Line of Section 15		37-E , NMPM, ROOSEV			
	Line of Section 15 To	ownship 8-5 Range		· · · · · · · · · · · · · · · · · · ·		
Ш.	DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL GA	**NM-0145897, NM0358 Address (Give address to which appro	•		
	International Crude Cor	poration- Trucks	2454 Industrial Blvd.,	Abilene, TX 79605		
	Name of Authorized Transporter of Co Warren Petroleum Compan		P.O. Box 1589, Tulsa,	ved copy of this form is to be sent) OK 74102		
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. P.ge.	Is gas actually connected? Wh	en lovember 17, 1971		
IV.	If this production is commingled w COMPLETION DATA	ith that from any other lease or pool,	give commingling order number: New Well Workover Deepen	Plug Back Same Resty. Diff. Resty.		
	Designate Type of Completi	on – (X)	Moreover Deepen	Flug Buck Same Res-V. Diff. Res-V.		
	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		
	Perforations	<u> </u>		Depth Casing Shoe		
	TUBING, CASING, AN		D CEMENTING RECORD	<u> </u>		
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
		,				
			1			
V.	TEST DATA AND REQUEST FOIL WELL		ifter recovery of total volume of load oil epth or be for full 24 hours)	and must be equal to or exceed top allow-		
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas li	ft, etc.)		
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size		
	Actual Prod. During Test	Oil-Bbls.	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		
VI.	CERTIFICATE OF COMPLIAN	CE	OIL CONSERVA	TION COMMISSION		
	I hereby certify that the rules and	regulations of the Oil Conservation	APPROVED 1111 10	<u> </u>		
	Commission have been complied	with and that the information given e best of my knowledge and belief.	BY ORIGINAL SIGNED 31			
	_ 1		JERRY SEXTON TITLE DISTRICT 1 SUPE			
	1 LA	equar	This form is to be filed in o			
	Te:	(Signature)		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		
	Operator	······································	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. 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.			
	May 27, 1982	tle)				
		ate)				
			Canacata Forms C-104 must	he filed for each noof in multiply		

NO. OF COPIES RECE	İ		
DISTRIBUTIO			
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U.S.G.S.			
LAND OFFICE			
TRANSPORTER	01		
	GAS		
OPERATOR			
PRORATION OF	<u> </u>		

. [NO. OF COPIES RECEIVED					
	DISTRIBUTION	NEW MEXICO OIL CO	NSERVATION COMMISSION	Form C-104		
	SANTA FE		OR ALLOWABLE	Supersedes Old C-104 and C-110		
	FILE		AND	Effective 1-1-65		
ľ	U.S.G.S.	AUTHORIZATION TO TRAN	ISPORT OIL AND NATURAL GAS			
Ī	LAND OFFICE					
	TRANSPORTER OIL					
	GAS					
	OPERATOR					
1.	PRORATION OFFICE					
l	Operator					
	TOM L. INGRAM					
	Address					
. [Roswell, New Mexico 882				
	Reason(s) for filing (Check proper box)		Other (Please explain)			
	New Well	Change in Transporter of:				
1	Recompletion	Oil XX Dry Gas	Notification of	gas connection		
	Change in Ownership	Casinghead Gas Condens	ate			
	If change of ownership give name and address of previous owner					
	•					
11.	DESCRIPTION OF WELL AND L	EASE	mation Kind of Lease	Federal Legse No.		
İ	Lease Name	Weil No. Pool Name, Including For	State, Federal or	reactar -		
	<u> Light</u>	<u>l Bluitt San And</u>	res Associated State, Federal or	Fee Comm. **		
	Location					
	Unit Letter 1 ; 198	OFeet From The <u>South</u> Line	and 660 Feet From The	East		
			_			
	Line of Section 15 Town	nship 8-S Range 37-	E , NMPM, Roosey	elt County		
				520 NNO40760		
III.	DESIGNATION OF TRANSPORT	ER OF OIL AND NATURAL GAS	NM-0145897, NM0358 Address (Give address to which approved	copy of this form is to be sent)		
	Name of Authorized Transporter of Oil		,			
	Mobil Oil Corporatio Name of Authorized Transporter of Casi	n trucks	P. O. Box 900, Midland, Address (Give address to which approved	copy of this form is to be sent)		
		· ·	P. O. Box 1589, Tulsa, Oklahoma 74102			
	Warren Petroleum Com					
	If well produces oil or liquids,	Unit Sec. Twp. Rge.	****	vember 17, 1971		
	give location of tanks.			Vember 17, 1971		
	If this production is commingled with	h that from any other lease or pool, g	give commingling order number:			
IV.	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen F	Plug Back Same Restv. Diff. Restv.		
	Designate Type of Completion	n = (X)				
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
	Date Spaces					
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth		
	and the second second					
	Perforations	<u> </u>		Depth Casing Shoe		
	1 411312113113	•				
		TUBING, CASING, AND	CEMENTING RECORD			
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
	HOLE SIZE					
	THE DAMA AND PROJECT FO	OP ALLOWARIE (Test must be at	fter recovery of total volume of load oil an	d must be equal to or exceed top allow-		
٧.	TEST DATA AND REQUEST FOOL WELL	able for this de	pth or be for full 24 hours)			
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift,	etc.)		
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size		
	Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	Gas - MCF		
	I					
	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		
2/1	CERTIFICATE OF COMPLIAN	CE	OIL CONSERVAT	TION COMMISSION		
41	CERTIFICATE OF COMPLIAN	-				
AP			APPROVED FEB 1	4 19/6		
I hereby certify that the rules and regulations of the Oil Conservation Commission have been compiled with and that the information given						
	above is true and complete to the best of my knowledge and belief.		BYOrig. Signed by			
			Joe D. Ramey TITLE			
	1 01	ue	This form is to be filed in compliance with RULE 1164.			
			Inix form to 10 No think of			

1 01	
- Jon I dry	and a second light of the second light of the second
(Sifikation)	
0perator	
(Title)	
2/11/72	

(Date)

If this is a request for allowable for a newly drilled or despend will, this form must be accompanied by a tabulation of the deviation (asia lases as in swell in swellesses with must it!)

All sections of this form must be filled out completely for allowable on new and recompleted wells.

spie 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.

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FEB 1 4 1072 OIL CONSERVATION COMM. HOBBS, N. M.