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HO. OF COPIES RECE	IVED	L	
DISTRIBUTION			1_1
SANTA FE			
FILE			
u.s.g.s.			
LAND OFFICE		_	
TRANSPORTER	OIL	_	
	GAS		
OPERATOR			
PRORATION OF	<u> </u>		
Operator			

HO. OF COPIES RECEIV	/CD		1 f -		D C 104
DISTRIBUTION	•	4-1	W MEXICO OIL CONS	SERVATION COMMISSIO	Form C+104 Supersedes Old C-104 and C-110
ANTA FE				R ALLOWABLE	Effective 1-1-65
ILE			A AUTHORIZATION TO TRANS	ND DADT NIL AND NATHRAL (SAS
.s.g.s.			AUTHORIZATION TO TRANS	PUR FUIL AND HATOKAL C	
AND OFFICE				ļ	
RANSPORTER -	OIL				
	GAS				
PERATOR					
RORATION OFFI	ICE				
erotor	Rese	rve Oi	il, Inc.		
ldress				- 707 01	
	312 F	ABF B	uilding, Midland, Texas	19701	
eason(s) for filing (Other (Please explain)	
ew Wall			Change in Transporter of:		
ecompletion			Oil Dry Gas		
hange in Ownership	,[X]		Casinghead Gas Condensa	ite []	
			Reserve Oil and Gas Co	manany 312 HBF Bld	lg., Midland, TX 79701
change of owners d address of prev	hip give				8.7
			This change to be effect	ive _{JAN} -1 1977	
ESCRIPTION O	F WELL	_ AND L	Well No. Pool Name, Including Form	mation Kind of Lea	!
ease Name			T 1 (Oi		ral or Fee Fee
South Lang	glie Ja	u Unit			
ocation	-	99	90 Feet From The West Line	2310 Feet From	n The South
Unit Letter	L	;	Feet From TheLine	and	
	1 0		Ship 25-S Range 3	7-E , NMPM,	Lea County
Line of Section	17	Town	iship 23-3 Nange		
			TO OF OH AND NATURAL GAS		til forming he centl
ESIGNATION O	F TRA	NSPORT	ER OF OIL AND NATURAL GAS	Address (Give address to which app	roved copy of this form is to be sen:)
Name of Authorized				Box 2648, Houston	, Texas 77001
Shell Pipe	Line	Comp	any Inghead Gas A or Dry Gas	Address (Give address to which app	proved copy of this form to
Name of Authorized	Transcor	1 Con (Camananti	Box 1492, El Paso	, Texas 79900
El Paso N			Tunti Sec. Twp. Fige.	Is gas actually connected?	^{When} ∐nknown
If well produces oil	l or liquid	.s,	J 7 25-S 37-E	Yes	Ulkilowii
give location of tan	1KS.		1,	rive commingling order number:	
f this production	is commi	ingled with	h that from any other lease or pool, g		Plug Back Same Res'v. Diff. Res
COMPLETION I	DATA_		Oil Well Gas Well	New Well Workover Deepen	Ping Data
Designate Ty	ype of C	completio	n - (X)	1	P.B.T.D.
Date Spudded			Date Compl. Ready to Prod.	Total Depth	
Date Sharana					Tubing Depth
Elevations (DF, R)	KB. RT.	GR, etc.j	Name of Producing Formation	Top Oil/Gas Pay	
					Depth Casing Shoe
Perforations					
10.10.				THE DECORD	
			TUBING, CASING, AND	DEPTH SET	SACKS CEMENT
HOL	E SIZE		CASING & TUBING SIZE	DEPTHSET	
					and must be squal to or exceed top al
DATA A	ND PE	OUEST F	FOR ALLOWABLE (Test must be a able for this d	after recovery of total volume of load epth or be for full 24 hours)	i oil and must be equal to or exceed top al
OIL WELL	MD KE	40201 -		Producing Method (Flow, pump, g	as lift, etc.)
Date First New C	il Run To	Tanks	Date of Test	1.0000	
				Casing Pressure	Choke Size
Length of Test			Tubing Pressure		
1				Water-Bbis.	Gds - MCF
Actual Prod. Dur	ing Test		Oil-Bble.		
		:= :			
I					
GAS WELL				Bbls. Condensate/MMCF	Gravity of Condensate
Actual Prod. Te	st-MCF/	D	Length of Test		
				Casing Pressure (Shut-in)	Choke Size
Testing Method	(pitot, ba	ck pr.)	Tubing Pressure (Shut-in)		
				OII CONSE	RVATION COMMISSION
. CERTIFICAT	E OF C	OMPLIA	NCE	1 CONSE	isa isat k
					Orly Signed by
					Capacit (Milliand MJ
	u that the	e rules an	d regulations of the Oil Conservation	n	V Casten
I hereby certify Commission has	y that the	e rules an	d regulations of the Oil Conservation with and that the information give	ın II	lerry Sexton
I hereby certify Commission has above is true	y that the ave been and com	e rules an complied in the complete to the com	d regulations of the Oil Conservation with and that the information give the best of my knowledge and belief	f. BY	lerry Sexton Dist 1, Supv.
I hereby certify Commission has above is true	y that the ave been and com	e rules an complied plete to	d regulations of the Oil Conservation is with and that the information give the best of my knowledge and belies	f. BY	lerry Sexton

Jehn Johnson (Signature)	
District Manager	
(Title)	
JAN - 6 1977	

(Date)

Inis form is to be filed in compliance with RULE 1104.

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.

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