NO. OF COPIES RECE	IVED ;		
DISTRIBUTIO			
SANTA FE			
FILE			
U.S.G.5.			
LAND OFFICE			
IRANSPORTER	OIL		
	GAS		
OPERATOR			
PRORATION OF			
Operator			
Majo	or, Gi	ebe	el 8
Address			

EW MEXICO OIL CONSERVATION COMMISSI

Form C-104
Superades Old C-104 and C-110

SANTA FE	REQUEST	FOR ALLOWABLE	Effective 1-1-65
FILE	AUTUODIZATION TO TO	AND ANSPORT OIL AND NATURAL (• • • • • • • • • • • • • • • • • • •
LAND OFFICE	AUTHORIZATION TO TRA	ANSPORT OIL AND NATURAL	SAS
OIL	-		
TRANSPORTER GAS			
OPERATOR			
PRORATION OFFICE			
Operator			
Major, Giebe	l & Forster		
Address			
	Building, Midland, Texas	79701	
Reason(s) for filing (Check proper		Offer IN ease emploin	S MUST NOT BE
New Well	Change in Transporter of:	FLARTD ATTE	2/16/21
Recompletion	Oil Dry Go	== 1 · · · · · · · · · · · · · · · · · ·	Frion to R-1970
Change in Ownership	Casinghead Gas Conde	nsate IS OBTAINED.	· · · · · · · · · · · · · · · · · · ·
If change of ownership give nam	e		
and address of previous owner _	THIS WELL HAS BEEN PL DESIGNATED BELOW. IF Y	ACED IN THE POOL	
. DECORPORAL OF WELL AS	MOTIEV TILLO OFFICE	TOO DO NOT CONCUR	
II. DESCRIPTION OF WELL AN	Well No. Pool Name, Including F	ormation R-4/06 Kind of Leas	Lease No.
Huber	1 North Bagley		alor Fee Fee
Location			
Δ	510 Feet From The North Lir	ne and 660. Feet From	_{The} East
Unit Letter A ;			
Line of Section 9	Township 12-S Range	33-E , NMPM, Lea	County
II. DESIGNATION OF TRANSPO	ORTER OF OIL AND NATURAL GA	NS	
Name of Authorized Transporter of	Oil Condensate	Address (Give address to which appro	
Admiral Crude Oil C	orporation	P. O. Box 1345, Midl	
Name of Authorized Transporter of	Casinghead Gas 📉 or Dry Gas 🦳	Address (Give address to which appro	
Warren Petroleum		P. O. Box 1589, Tulsa	
If well produces oil or liquids,	Unit Sec. Twp. Rge. A 9 12-S 33-	1 1	Waiting on Warren
give location of tanks.	A 3 12-b 00		
If this production is commingled	with that from any other lease or pool,	give commingling order number:	
V. COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v
Designate Type of Compl		X	
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
<u> </u>	1/7/71	10,141	
12/1/70 Elevations (DF, RKB, RT, GR, etc	. 1	Top Oil/Gas Pay	Tubing Depth
	Dollas li mil	9507	9500
4253 GL Perforations	Telescope file		Depth Casing Shoe
3/8" jet 9507; 11; 2	21; 39; 59; 63		10,141
	TUBING, CASING, AN	D CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17 1/2	12 3/4	400	400 sx
11	8 5/8	3785	250 sx
7 7/8	4 1/2	10141	400 sx
V. TEST DATA AND REQUEST	FOR ALLOWABLE (Test must be	after recovery of total volume of load oi	l and must be equal to or exceed top allow
OIL WELL	aote jor this a	epth or be for full 24 hours) Producing Method (Flow, pump, gas	11/4
Date First New Oil Run To Tanks			1111, 210.7
1/8/71	1/7 & 1/8/71	Flowing Casing Pressure	Choke Size
Length of Test	Tubing Pressure	Packer	3/4"
24 hours	320	Water-Bbls.	Gas-MCF
Actual Prod. During Test	Oil-Bbis.		636
628	408	220	. 000
	-		
GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Actual Flod. 1981-MOF/D			<i>'</i>
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
. Esting 10. others (prior)			
TO CONTRACT OF COURT	IANGE	OH CONSERV	ATJON COMMISSION
VI. CERTIFICATE OF COMPLI	IANCE	OIE SONSER	7, 1, 101, 100 million (1)
	and completions of the Oil Conservation	APPROVED A	, 19
Commission have been compli	ertify that the rules and regulations of the Oil Conservation in have been complied with and that the information given		10.50
above is true and complete to	the best of my knowledge and belief.	BY 10	the state of the s
		TITLE SUPERVISOR TO	
_	f	- N - / / - '	compliance with RULE 1104.
() / A	<i>y</i> , ,	Interiorm to to be tited in	owable for a newly drilled or deepend
- July	Land North College	## ALIN IN A AAMHAND FOR ATT	
. 7	ULL Ulle	Il	annied by a tabulation of the deviate
•	Signature)	well, this form must be accomp tests taken on the well in acc	panied by a tabulation of the deviation
Engineer		well, this form must be accompanied tests taken on the well in acc	panied by a tabulation of the deviation or the deviation
•	(Title)	well, this form must be accomptests taken on the well in accomptests on new and recompleted with the state on new and recompleted with the state of	panied by a tabulation of the deviation or the deviation

(Date)

Separate Forms C-104 must be filed for each pool in multiply completed wells.