DISTRIBUTION SANTA FE FILE

NEW MEXICO OIL CONSERVATION COM. SION REQUEST FOR ALLOWABLE

AND

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

LAND OFFICE RE			NSPORT OIL AND NATURAL G.	AS.	
,	OPERATOR PROBATION OFFICE	SEP 2 8 197			
1.	Operctor		O. C. C.		
Midwest Oil Corporation ARTESIA, OFFICE					
	Reason(s) for Hing (Check proper box)				
	New Well Change in Transporter of: Recampletion Oil Dry Gas Change in Ownership Casinghead Gas Condensate X				
	If change of ownership give name and address of previous owner				
II.	DESCRIPTION OF WELL AND LEASE Lease Name Well No. Pool Name, Including Formation Kind of Lease Lease No.				
	South Empire Deep Unit	3 South Empire/Mo	See See	or Fee State B4458-33	
	Location Unit Letter N ; 198	80 Feet From The West Line	e and 660 Feet From Ti	neSouth	
	Line of Section 31 Township 17-S Range 29-E , NMPM, Eddy County				
111.	ESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS				
	Name of Authorized Transporter of Oil Amoco Pipeline for acct Navajo Crude Oil Purchas Name of Authorized Transporter of Cas	or Condensate X of Famariss sing Company Inghead Gas or Dry Gas X	Address (Give address to which approve 2300 Cont Natl Bk. Bldg P. O. Drawer 175, Artes Address (Give address to which approve	. Ft. Worth, Tex 76102	
	Transwestern Pipeline Co	ompany Unit Sec. Twp. Pge.	Box 2521, Houston, Texa	s 77001	
	If well produces all or liquids, give location of tanks.	N 31 17 29	yes	8-15-73	
τv	If this production is commingled with COMPLETION DATA	h that from any other lease or pool,	give commingling order number:)	
	Designate Type of Completio	n - (X) Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Resty. Diff. Resty.	
	Date Spuddød	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		Depth Casing Shoe		
		TUBING, CASING, AND CEMENTING RECORD			
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
V.	TEST DATA AND REQUEST FOR ALLOWABLE (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)				
	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 Siza	
	Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	Gas-MCF	
	GAS WELL	GAS WELL			
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condenacts/MMCF	Gravity of Condensate	
	Testing Method (pitot, back pr.)	Tubing Pressure (Shnt-in)	Casing Pressure (Shut-in)	Choke Size	
VI.	. CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION APPROVED OCT 1 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.		BY W. a. Siessett		
			TITLE OIL AND GAS INSPECTOR		
	Production Clerk (Signa: we) Production Clerk (Title) 9-27-73		This 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 tebulation 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, IM, and VI for changes of owner, well name of member, or transporter, or other such change of condition.		
			Separate Forms C-104 must be filed for each pool in multiply completed wells		