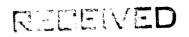
	NO. OF COPIES RECEIVED					
	DISTRIBUTIO					
	SANTA FE					
	FILE					
	U.S.G.S.					
1.	LAND OFFICE					
	TRANSPORTER	OIL				
	, it will be a second and a second a second and a second	GAS				
	OPERATOR					
	PRORATION OFFICE					

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-104

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

	SANTA FE		REQUEST FOR ALLOWABLE		Supersedes Old C-104 and C-110 Elfoctive 1-1-65			
ļ	FILE U.S.G.S.		AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS					
	LAND OFFICE	.3						
	TRANSPORTER GAS							
	OPERATOR	<u> </u>						
1.	PRORATION OFFICE Operator							
	Amini Oil Corporation							
	400 Wall Towers West, Midland, Texas 79701							
	Reason(s) for filing (Check proper box) Other (Please explain) New Well Change in Transporter of:							
	Recompletion		Oil Dry Gas	s				
	Change in Ownership		Casinghead Gas Conden	sate				
	If change of ownership give na and address of previous owner		T.F. Hodge, 1605 Con	tinental Bank Bldg. Ft. W	Vorth, Texas 76102			
II.	DESCRIPTION OF WELL A	ND I	Well No. Pool Name, Including Fo	ormation Kind of Lease	Lease No.			
	Humble State		3 Inbe-Pennsyl					
	Location	208	6 Feet From The North Lin	e and 766 Feet From Th	• West			
	0.0		10.0	33-E , NMPM, Le:a	County			
					County			
11.	DESIGNATION OF TRANSI Name of Authorized Transporter of	ORT	FER OF OIL AND NATURAL GA	Address (Give address to which approve	d copy of this form is to be sent;			
	Service Pipeline C	omp	any	3411 Knoxville, Lubbock Address (Give address to which approved	c. Texas 79408			
	Name of Authorized Transporter of Warren Petroleum (P.O. Box 1589, Tulsa,				
	If well produces oil or liquids,	7011	Unit Sec. Twp. Rge.	Is gas actually connected? When				
	give location of tanks.		E 26 10-S:33-E		10-7-62			
	If this production is commingle COMPLETION DATA	d wit	h that from any other lease or pool,		+++			
	Designate Type of Comp	letio	n - (X) Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.			
	Date Spudded		Date Compl. Ready to Prod.	Total Depth	P.B.T.D.			
	Elevations (DF, RKB, RT, GR, e	tc.j	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 REQUES	T FO	OR ALLOWABLE (Test must be a	fter recovery of total volume of load oil an	d must be equal to or exceed top allow-			
٠.	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.) (I) WELL Date First New Oil Run To Tanks Date of Test Producing Method (Flow, pump, gas lift, etc.)							
					Choke Sixe			
	Length of Test		Tubing Pressure	Casing Pressure	Chore Size			
	Actual Prod. During Test		Cil-Bble.	Water - Bbls.	Gas-MCF			
			<u> </u>					
	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 COMPL	IANO	CE	OIL CONSERVAT	Hen Commission			
	hereby certify that the rules and regulations of the Oil Conservation		APPROVED JUN 20 1	OIL CONSERVATION COMMISSION				
	Commission have been compl	led w	with and that the information given best of my knowledge and belief.	BY STRICT!				
	. 1	Ą		TITLE This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or despend				
	CX.	X	Irla					
(Signature) Controller				well, this form must be accompanied by a tabulation of the deviation tosts taken on the well in accordance with RULE 111.				
	Co:	ntro (Ti		All sections of this form must be filled out completely for allowable on new and recompleted wells.				
	Jun	e 2	21, 1971	Fill out only Sections I. II.	III, and VI for changes of owner,			
		(Da	ite)	well name or number, or transporter, or other such change of condition.				



JUN 221971
OIL CONSERVATION COMM. HOBBS, N. M.