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SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PRORATION OFFICE			
Operator	-		

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-104

SAN	TAFE	REQUEST	FOR ALLOWABLE OF FICE O.	Supersedes Old C-104 and C-110 Effective 1-1-65	
FILE			AND		
U.S.		AUTHORIZATION TO TRA	NSPORT OIL AND NATURAL	^&c	
LAN	ID OFFICE		71N1 10 12 42 310		
TRA	NSPORTER OIL	_			
	GAS				
555	RATOR PRATION OFFICE				
I. Opera					
o pos		Trobaugh			
Addre	ess				
		t National Bank Builds	ing, Midland, Texas		
Reas	on(s) for filing (Check proper bo		Other (Please explain)		
New	2.5	Change in Transporter of:			
-	mpletion	Oil Dry Ga	s		
	ge in Ownership	Casinghead Gas Conden	isate		
	, , , , , , , , , , , , , , , , , , , ,		7:		
	nge of ownership give name			I O de Jak	
and a	ddress of previous owner		741		
II. DESC	CRIPTION OF WELL ANI	LEASE	クリタン・リノク タク	Million M. Jak	
Leas	e Name	Well No. Pool Na	me, Including Formation North Bayle	Kind of Lease	
	Dallas	1 - Unc	designated middle De	State, Federal or Fee Fee	
Loca	tion		7 771	3910anian R-3091	
(1)	nit Letter <u>M</u> ; <u>66</u>	50 Feet From The SOUTh Lin	e and 660 Feet From	The West	
	,				
Li	ne of Section 15 , T	ownship 11-S Range	33-E , NMPM, L	County	
		RTER OF OIL AND NATURAL GA		`	
Name	of Authorized Transporter of C	or Condensate	Address (Give address to which appro	ved copy of this form is to be sent)	
Pa	n American Petro	oleum Corporation	P. O. Box 1725, Mi	dland, Texas	
		Casinghead Gas 🔣 💮 or Dry Gas 🗔	Address (Give address to which appro		
Wa	rren Petroleum (corporation	P. O. Box 1589, Tu		
If we	ll produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected? Wh	en	
give	location of tanks.	M 15 11-5 33-E	No		
If this	s production is commingled v	with that from any other lease or pool,	give commingling order number:	****	
	PLETION DATA				
ח	esignate Type of Complet	ion - (X)	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.	
			X		
Date	Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
	3/18/66	5/3/66	10,040'	9,920'	
Pool	17-31	Name of Producing Formation	Top Oil/Gas Pay 9756	Tubing Depth	
<u> </u>	Undesignated	Middle Penn.	<u> </u>	9,749	
Perfo		8, 9771, 9774,9776, 9		Depth Casing Shoe 10,040'	
	9894, 989			10,040	
			CEMENTING RECORD		
-	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
	15"	12 3/4"	370'	300	
	11"	8 5/8"	3,750'	350	
	7 7/8"	5 1/2"	10,040'	400	
l		2 3/8"	9,743'		
		FOR ALLOWABLE (Test must be a able for this de	fter recovery of total volume of load oil opth or be for full 24 hours)	and must be equal to or exceed top allow-	
	WELL First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas la	ift, etc.)	
	5/4/66	5/17/66	Pumping (Kobe	2)	
Lenc	th of Test	Tubing Pressure	Casing Pressure	Choke Size	
201.9	24 hrs	and does	180	1 3/4"	
Actu	al Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF	
11013		246	440	381	
l	· · · · · · · · · · · · · · · · · · ·	440	770		
CAS	WELL				
	WELL al Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
Tee	ting Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size	
1.63	The meaning (process occur pres)			1	
		NGD	011 00110=-11	A TION COMMISSION	
VI. CERTIFICATE OF COMPLIANCE		NCE	OIL CONSERV	ATION COMMISSION	
			APPROVED, 19		
I her	eby certify that the rules an	d regulations of the Oil Conservation with and that the information given	AFFRUVED	, 15	
Comr	mission have been complied e is true and complete to t	the best of my knowledge and belief.	87		

Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.	
Clink Stotning	
(Signature)	
(Title)	

May 18, 1966

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.

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

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

Fill out Sections I, II, III, and VI only 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.