NO. OF COPIES RECEIVED			
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
IRANSPORTER	OIL		
	GAS		
OPERATOR			
222242121		I	

NEW MEXICO OIL CONSERVATION COMMITTED IN REQUEST FOR ALLOWABLE

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

	U.S.G.S. LAND OFFICE I RANSPORTER OIL GAS OPERATOR PRORATION OFFICE	AUTHORIZATION TO TI	RANSPORT OIL AND NATURA	L GAS		
I.	Operator	any formerly Southe	rn Petroleum Explor	ation. Inc.		
	Address		Same			
•	Reason(s) for filing (Check proper box New We!! Recompletion Change in Ownership	Change in Transporter of: Oil Dry	Other (Please explain) merger with	name change due to Petroleum Exploration ent company "The Wisex		
	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 Name					
	State SPX	4 Eumont	State, Fed	eral or Fee State B-11,29		
	Unit Letter G ; 16	50 Feet From The Nerth	line and 1650 Feet Fro	om The		
	Line of Section 33 To	wnship 20-S Range	36-E , NMPM,	Lea County		
III.	DESIGNATION OF TRANSPORT		AS			
	Name of Authorized Transporter of Oil Texas-New Mexico P	ipe Line Co.				
	Name of Authorized Transporter of Car Phillips Petroleum	_	Address (Give address to which app Bartlesville, Ok	proved copy of this form is to be sent) 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1		
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. B 33 20-S 36	Is gas actually connected? •E Yes	When 1956		
TW	If this production is commingled with			not commingled		
. .	Designate Type of Completic	on - (X)	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, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth		
	Perforations			Depth Casing Shoe		
	HOLE SIZE	TUBING, CASING, AN CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
V.	TEST DATA AND REQUEST FO			vil and must be equal to or exceed top allow-		
	Date First New Oil Run To Tanks Date of Test					
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size		
	Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	Gas-MCF		
ļ						
r	GAS WELL					
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate		
	Testing Method (pitos, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size		
;	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. (Signature)		OIL CONSERVATION COMMISSION APPROVED APPROVED, 19 BY SUPERVISOR DISTRICE D			
-			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 tabulation of the deviation tests taken on the well in accordance with RULE 111.			
-	District Manager (Title	le)	1	nust be filled out completely for allow-		
-	April 7. 1971 (Date)		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

DE VED

APR 0 1971

OIL CURSETVATION COMM.