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م	NO. OF COPIES RECEIVED 5				
1-			NSERVATION COMMISSION	Form C-104	
ŀ	SANTAFE		OR ALLOWABLE	Form C-104 Supersedes Old C-104 and C-110	
ŀ	FILE		110	Effective 1-1-65	
Ē	U.S.G.S.	AUTHORIZATION TO TRAN	SPORT OIL AND NATURAL	GASECEIVED	
	LAND OFFICE			MAR 1 9 1970	
	OPERATOR I			5 -	
1.	PRORATION OFFICE			U.C.C.	
Γ	Operator	/		ARTESIA, OFFICE	
	Read & Stevens, Ir				
		Roswell, New Mexico 8	8201		
	Reason(s) for filing (Check proper box)		Other (Please explain)		
	New Well	Change in Transporter of:			
	Recompletion	Oil Dry Gas Casinghead Gas Condens			
	Change in Ownership	Casinghead Gas Condens	lare Change wase	neme	
	If change of ownership give name and address of previous owner				
11	DESCRIPTION OF WELL AND L	EASE			
	Lease Name	Well No.; Pool Name, Including Fo	rmation Kind of Lea	-	
	Trobough Com	1 Buffalo Valley	- Penn (undes) State, KeXe		
		Creeth	1650	East	
	Unit LetterJ; 1650 Feet From The South Line and1650 Feet From TheEast				
		nship 15S Range	27E , NMPM,	Chaves County	
	Line of Section I Town				
Ш.	DESIGNATION OF TRANSPORT	ER OF OIL AND NATURAL GAS	5		
	Name of Authorized Transporter of Oil	or Condensate 🕅	Address (Give dauless to which upp	roved copy of this form is to be sent)	
	Scurlock Oil 6.		428 Mid-American B	uilding, Midland, Texas oved copy of this form is to be sent)	
	Name of Authorized Transporter of Casi		P. O. Box 6666, Ode		
	Phillips Petroleu	Unit Sec. Twp. Ege.		Then 7-1.5-70	
	If well produces oil or liquids,	J 1 15S 27E	No yes	-3-30-70	
	If this production is commingled with		give commingling order number:		
IV.	COMPLETION DATA			Plug Back Same Res'v. Diff. Res'v.	
	Designate Type of Completio	n - (X)	X		
	Date Spudded	Date Compl. Ready to Prod. 3-18-70	Total Depth 8590'	Р.В.Т.D. 8543'	
	12-27-69	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
	Elevations (DF, RKB, RT, GR, etc.) 3529 ¹ RKB	Atoka	84 43 '	8228'	
	Designations			Depth Casing Shoe 8575 RKB	
	8434' - 8468' w/1	$\frac{1}{2}$ " JSPF (26 holes)			
			DEPTH SET	SACKS CEMENT	
	HOLE SIZE	CASING & TUBING SIZE 12 3/4" csg	347	850	
		<u>8 5/8'' csg</u>	1620	200	
	7 7/8"	4 1/2" csg	8575	350 Pkr	
		2 3/8" tbg	8228	were and the second sec	
v	TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to cr exceed to a able for this depth or be for full 24 hours)				
	OIL WELL 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 Size	
				Gas-MCF	
	Actual Prod. During Test	Oil-Bbls.	Water-Bbls.		
	l	<u></u>			
	GAS WELL				
	Actual Prod. "est-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
	1.25	4 hrs	20	60.6	
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in) Pkr	Choke Size $3/4^{11}$	
	Pitot	2350			
VI	. CERTIFICATE OF COMPLIAN	. CERTIFICATE OF COMPLIANCE OIL CONSERVATION COMMISSION			
	I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given		APPROVED_JUL 201970 . 19		
	above is true and complete to the best of my knowledge and belief.				
			TITLE GAS INSPLCTUD		
	A = A = A		This form is to be filed in compliance with RULE 1100.		
	Milling Actions		If this is a request for allowable for a newly drilled a standard well, this form must be accompanied by a tabulation of the solution		
	(Signature)		well, this form must be accompanied by a tabulation of the terreturn tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely of another able on new and recompleted wells.		
	(Title)				
	3-18-70	**** 5 /	able on new and recompleted weils. Fill out only Sections I, II, III, and VI for changes 5, 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		
)ate)			

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MAR 1 9 1970

INCLINATION REPORT

O. C. C. ARTESIA, OFFICE

<u>Field Name:</u> Buffalo Valley - Penn (undesig) <u>County</u>: Chaves State: New Mexico <u>Operator</u>: Read & Stevens, Inc. <u>Address</u>: P. O. Box 2126, Roswell, New Mexico <u>Lease Name & No.</u>: Trobough <u>Well No.</u>: 1 <u>Survey</u>: 1650' FSL & 1650' FEL ^V Section 1-15S-27E.

Record of Inclination

	Angle of
Depth (feet)	Inclination (degree)
459	1 1/2
950	1 3/4
1445	3/4
2020	1/4
2500	1
3200	1/2
3650	3/4
4300	1/2
4795	1/4
5185	2
5480	1
5620	2 1/4
5900	2 3/4
6070	2 1/4
6361	1 3/4
6814	1
7460	1/2
8095	1/4
8430	3/4

Survey was taken in Open Hole.

Certification of personal knowledge Inclination data:

I hereby certify that I have personal knowledge of the data and facts placed on this form, and that such information given above is true and complete.

tuque alta Signature

READ & STEVENS, INC. Company

Sworn to and subscribed before me this 18th day of March, 1970.

Notary Public in and for CHAVES COUNTY,

Notary Public in and for CHAVES COUNTY, New Mexico

My Commission expires: August 22, 1972.