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Ì	SANTA FE				
	FILE			1	
	U.S.G.S.				
	LAND OFFICE				
	TRANSPORTER	OIL		<u> </u>	
		GAS	1		
	OPERATOR		1		
١.	PRORATION OFFICE				

	SANTA FE	Supersedes Old C-104 and C-110 Effective 1-1-65						
-	U.S.G.S.		OR ALLOWABLE E C E I AND ISPORT OIL AND NATURAL					
ł	LAND OFFICE	AUTHORIZATION TO TRAIN		1971				
	TRANSPORTER OIL							
}	OPERATOR /		E.C.					
1.	PRORATION OFFICE		ARTEENA					
	Delport Oil Corporation /							
	3471 First Natl Bank Bldg. Dallas, Texas 75202							
	Reason(s) for filing (Check proper box)		Other (Please explain)					
	New Well	Change in Transporter of:		f Casinghead Gas				
	Recompletion Change in Ownership	Oil Dry Gas Casinghead Gas Condens	=					
	If change of ownership give name and address of previous owner							
II.	DESCRIPTION OF WELL AND LEASE Well No. Pool Name, Including Formation Kind of Lease No.							
	Lease Name	3 Double L Qu		1				
	Location	Court h	220	East				
	Unit Letter P 990	Feet From The South Line		n The				
	Line of Section 1 Town	nship 15-S Range 2	29-E , NMPM, Cha	Ves County				
	THE ANGROPE	ED OF OH AND NATURAL GAS	S					
III.	DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil or Condensate Address (Give address to which approved copy of this form is to be sent) Attenda, New Mexico 88210							
	Navajo Refining Co	Pipe Line Division	Artesia, New Med Address (Give address to which app	proved copy of this form is to be sent)				
	Phillips Petroleum	Company	4th & Washington	Sts. Odessa, Texas 79				
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. 1 1 15-8 29-E	Is gas actually connected?	FEB 2 6 1971				
	If this production is commingled with	n that from any other lease or pool, a	give commingling order number:					
IV.	COMPLETION DATA	Cil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.				
	Designate Type of Completion	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.				
	Date Spudded	-						
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth				
	Perforations			Depth Casing Shoe				
		TUDING CASING AND	CEMENTING RECORD					
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT				
				all and much be caused as a succeed ass all and				
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, ga.	.jt, etc.)				
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size				
			Water-Bbls.	Gas - MCF				
	Actual Prod. During Test	Oil-Bbls.	H4(6) - 55151					
	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbis. Condensate/MMCF	Gravity of Condensate				
				Chalco Stan				
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size				
VI	CERTIFICATE OF COMPLIANCE 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.		OIL CONSERVATION COMMISSION					
₩.			APPROVED 19					
			I A Grassett					
			GIL AND GAS INSPECTOR					
		\bigcap	TITLE This form is to be filed in compliance with RULE 1104. This form is to be filed in compliance with RULE 1104.					
	11 F 10	ddy						
	(Sign	dent	well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.					
		,	tests taken on the fitted out completely for allow-					

(Title)

(Date)

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

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 completed wells.