NO. OF COPIES RECEIVED			
DISTRIBUTION SANTA FE		CONSERVATION COMMISSION	Form C-104 Supersedes Old C-104 and C-110
FILE		AND	Effective 1-1-65
U.S.G.S.	AUTHORIZATION TO TRA	ANSPORT OIL AND NATURA	L GAS
LAND OFFICE			RECEIVED
TRANSPORTER - OIL			,
OPERATOR			MAN 1 / 1005
I PRORATION OFFICE			MAY 1 4 1985
Gross & Kinche	eloe		
Address			ARTESIA, OFFICE
813 Petroleum	Bidg. Roswell, New Mexic	0	
Reason(s) for filing (Check proper b		Other (Please explain)	
tiew Well	Change in Trunsporter of:	- Old well re-e	ntered
recompletion	Casingherd Cas		
Thur, je ir, e wnershir,			
II. DESCRIPTION OF WELL AN	Well No. Fool No	ime, Including Formation	Kind of Lease
Southern Union Feder	al-27 I-27 Und	lesignated East Red	State, Federal or Fee Federal
Location K	980 South	Fake G. Ller. 1980	xEmax West
Unit Letteri	Peet From The	ne andFeet Fi	rom The XEASX West
Line of Section. 27 ,-	Township 16S Eange 2	28E , NMEM, Edd	y County
II. DESIGNATION OF TRANSPO Name of Authorized Transporter of	RTER OF OIL AND NATURAL GA	Address (Give address to which a	pproved copy of this form is to be sent)
Name of Authorized .ransporter of			
Name of Authorized Transporter of	Casinghead Gas 📄 or Dry Gas 🗙	Address (Give address to which a	pproved copy of this form is to be sent)
Phillips		Barttesville, Oklah	oma
If well produces oil or liquids,	Unit Sec. Twp. Age.	Is gas actually connected?	When
give location of tunks.	· · · · · · · · · · · · · · · · · · ·	No	Approximately 45 days.
If this production is commingled	with that from any other lease or pool,	give commingling order number:	
V. COMPLETION DATA	Cil Well Gas Well	New Well Workover Deepe:	Plug Back Same Restv. Diff. Restv.
Designate Type of Comple		1	X
Date 0, udded	Date Compl. Ready to Prod.	Total Depth	F.B.T.D.
3-21-65	5-1-65 Name of Freducing Pormatics.	10516 Top Cil/Gas Pay	1600 • Tubing Depth
Undesignated East	, Penrose	1400	1316
enteration Red Jake S. *	dur,		Depth Casing Shoe
1400-60			1478
	TUBING, CASING, AN	ID CEMENTING RECORD	
HOLESIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
7 7/8	2"	1478 1316	150
	Z	1510	
V. TEST DATA AND REQUEST	FOR ALLOWABLE (Test must be	after recovery of total volume of load	d oil and must be equal to or exceed top allow
OIL WELL	able for this a	lepth or be for full 24 hours) Producing Method (Flow, pump, g	
Date First New Gil Run To Tanks	Date of Test	Producing Method (Prote, pump, g	
Length of Test	Tuking Pressure	Casing Pressure	Choke Size
i, mgu or i sot			
Actual Prod. Luring Test	Cil-Bbls.	Water-Bbls.	Gas-MCF
GAS WELL Actual Frod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
ILL .	211		
Testing Method (pitot, back pr.)		Casin: Pressure	Choke Size
Back Pr.	47	27	1 6/6l∔
VI. CERTIFICATE OF COMPLL	ANCE	OIL. CONSE	RVATION COMMISSION
		APPROVED	, 19, 19
Commission have been complie	nd regulations of the Oil Conservation ed with and that the information giver	men.	trong
above is true and complete to	the best of my knowledge and belief.		
		TITLE	
	2		i in compliance with RULE 1104.
Superior C.	73 ross	If this is a request for	allowable for a newly drilled or deepene
() (S	Signature)	well, this form must be acc tests taken on the well in	ompanied by a tabulation of the deviation

A A	$\sim \sim $	~~
1 Kr	(Signature)	0
YOF	times Or	enter
	(Title)	-
5	-11-25	
C	(Date)	

 TITLE AND BAR MARK
 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.

tests taken on the well in accordance with RULE III. All sections of this form must be filled out completely for allow-able 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.