		1				
	DISTRIBUTION SANTA FE		CONSERVATION (4)	1551 0N	Form C-104 Supersedes O	ld C-104 and C+11
	FILE	AND Elfective 1-1-1 AUTHORIZATION TO TRANSPORT OIL AND NATURAL RECEIVED BY				
	LAND OFFICE	NOT OR FOIL AND NATURAL		ECEIVED BY		
	TRANSPORTER GAS	 -		JUL 1	9 1384	
1.	PRORATION OFFICE	1			C. E	
	DeltaUS Corpor	ration	1010	and the second sec	A, OFFICE	_
	Address		70705			
3100 C, North "A" Street, Midland, Texas 79705 Reason(s) for filing (Check proper box) New We!! Other (Please explain) New We!! Name abare from Deliver						
	New Weil Change in Transporter of: Recompletion Cil Change in Ownership Casinghead Gas Condensate					
	If change of ownership give name and address of previous owner	Delta Drilling Company,	3100 C, North "A	A" Street, Mi	.dland, Tex	as 79705
п.	DESCRIPTION OF WELL AND	LEASE Vell No.: Pool Name, Including F	Formation	Kind of Lease		
	Atsel Federal	2 Artesai Q-G-S		State, Federal or Fe	• Federal	Lease No. 062407
	Location 17; Unit Letter I ; South		ne and 990	Feel Grom The	East	
	0					
1		winship 175 Range	29E , NMPM,		Eddy	County
III.	DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL GA	AS Address (Give address to	which approved cop	y of this form is t	o be sentj
	Name of Authorized Transporter of Cas	singhead Gas 📄 or Dry Gas 📜	Address (Give address to		y of this form is t	o be sent)
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. P.ge.	Is gas actually connected	i		
	If this production is commingled with COMPLETION DATA	th that from any other lease or pool,	give commingling order	Deepen Plug	Pack Same Pas	'v. ' Diff. Res'v.
	Designate Type of Completio		New well workover		 l	i
	Date Spudaed	Date Compl. Ready to Prod.	Total Depth	P.B.	г. D .	
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubir	ng Depth	
	Perforations		Depti	Depth Casing Shoe		
ļ		D CEMENTING RECORD		SACKS CEM	ENT	
ł	HOLE SIZE	CASING & TUBING SIZE		· · · · · · · · · · · · · · · · · · ·	Post I	D-3
l					3-29- Chr. (85 9p.
	TEST DATA AND REQUEST FO	DR ALLOWABLE (Test must be a	fter recovery of total volum	e of load oil and mus	it be equal to or e	xceed top allow-
	able for this depth or be for full 24 hours) II. WEIL able for this depth or be for full 24 hours) ate First New Oil Run To Tanks Date of Test Producing Method (Flow, pump, gas lift, etc.)					
	Length of Test	Tubing Pressure	Cosing Pressure	Chok	• Size	
-	Actual Prod. During Test	011-B11.	Water-Bble.	Ges-	MCF	
GAS WELL						
ſ	Actual Prod. Test-MCF/D	Longth of Test	Bbls. Condensate/MMCF	Gravi	ty of Condensate	
+	Testing Method (pitot, back pr.)	Tubing Pressue (Shut-in)	Casing Pressure (Sbut-1	(n) Choke) Size	
л. (CERTIFICATE OF COMPLIANC	OIL CONSERVATION COMMISSION MAR 22 1985				
	I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given		APPROVED			
5	above is true and complete to the	BY ORIGINAL SIGNED BY LARRY BROOKS TITLE GEOLOGIST - NMOCD				
		This form is to b	on filed in complia	nce with RULE	1104.	
	Milley 1102 1	If this is a reque	If this is a request for allowable for a newly drilled or despend well, this form must be accompanied by a tabulation of the deviation tosts taken on the well in accordance with RULE 111. All arctions of this form must be filled out completely for allow-			
	Senior Engineer	All anctions of the				
<i>F</i>	(Tid	able on new and recompleted wells.				
-	(Dat	well name or number, or transporter, or other such change of constru- Separate Forms C-104 must be filed for each pool in multiply			e of conditions	
			I completed wells.			