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SANTA FE		ONSERVATION COMMISSION FOR ALLOWABLE	Form C-104 Supersedes Old C-104 and C-11
FILE /-	REQUEST	AND	Effective 1-1-65
U.S.G.S.	AUTHORIZATION TO TRA	INSPORT OIL AND NATURAL	GAS
LAND OFFICE	AUTHORIZATION TO TRA		
TRANSPORTER OIL /			RECEIVED
OPERATOR 2			DEO 0 1 1000
I. PRORATION OFFICE			DEC 2 1 1966
	f Texas - A Division e	f Chevren Oil Company	C. C. C.
	er, Texas		
Reason(s) for filing (Check proper box)	_	Other (Please explain)	
New Well	Change in Transporter of: Oil Dry Ga	ıs 🗍	
Recompletion Change in Ownership	Casinghead Gas Conder	7	4
If change of ownership give name and address of previous owner			
II. DESCRIPTION OF WELL AND	LEASE Ataka len		
Lease Name	Well No. Pool Name Including F	ormation Kind of Lea	Lease No.
Paul Terry et al "Gas Co	EB C 250024 (1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	\(\lambda \)	
Unit Letter H ; 165	Feet From The North Lir	ne andFeet From	The
Line of Section 15 Tox	wnship 188 Range	26E , NMPM,	Eddy County
<u></u>		10	
III. DESIGNATION OF TRANSPOR' Name of Authorized Transporter of Oil	rer of oil and natural GA or Condensate	Address (Give adaress to write appr	oved copy of this form is to be sent)
The Permian Corporation	ı	Box 3119, Midland, Te	
Name of Authorized Transporter of Casinghead Gas or Dry Gas Transvestern Pipe LineCompany		Address (Give address to which approved copy of this form is to be sent) Houston, Texas	
If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected?	Dec. 19, 1966
give location of tanks.	<u></u>		
If this production is commingled wi	th that from any other lease or pool,		Plug Back Same Resty. Diff. Resty
Designate Type of Completic	on - (X) Gas Well	New Well Workover Deepen	Plug Back Same Nesv. Din. Hes
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
8-19-66	10-1-66 Name of Producing Formation	9070	9034 Tubing Depth
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation Attacks (Penn.) Moyrow	Top Oil/Gas Pay	8840
Ateks (Penn.) Perforations			Depth Casing Shoe 9069
8958, 60, 62, 64, 70,	72, 74, 76, 78, 80, 82 1	N/2 TJFF	9009
		DEPTH SET	SACKS CEMENT
HOLE SIZE	CASING & TUBING SIZE	1230	1125 sxs.
12-1/4 7-7/8	4-1/2	9069	250 sxs.
V. TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be	after recovery of total volume of load o	il and must be equal to or exceed top allo
OIL WELL	able for this o	lepth or be for full 24 hours) Producing Method (Flow, pump, gas	
Date First New Oil Run To Tanks	Date of Teat.		
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	Gas-MCF
GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
1250	3 hours	0	Will report later
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
Back Pressure	990#	0	11/64 VATION COMMISSION
VI. CERTIFICATE OF COMPLIA	NCE	11	
y banaka namida shakika milan and	regulations of the Oil Conservation	APPROVED ULU 25	<u>966</u> , 19
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.		11 27 2	
		Barredola	
Marcelela -		If this is a request for allowable for a newly drilled or deepen	

(Signature) B. Davidsen

Lead DrillingEngineer

December 19, 1966

(Title)

(Date)

well, this form must be accompanied by a tabulation of tests taken on the well in accordance with RULE 111.

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.