1.	NO. OF COPIES RECEIVED / DISTRIBUTION	REQUEST F	NSERVATION COMMISSION OR ALLOWABLE AND ISPORT OIL AND NATURAL GA	Form C-104 Supersedes Old C-104 and C-110 REflective 1-1-65 OCT 2 1970 ARTESIA, DEFICE
	Recompletion Change in Ownership If change of ownership give name and address of previous owner DESCRIPTION OF WELL AND I Lease Name Creek AL Location	9 Shugart	ate	Lease No. Lease No. Fed. LC028990(b)
	Unit Letter /	nship 18S Range 301	_	
III.	DESIGNATION OF TRANSPORT	ER OF OIL AND NATURAL GAS	Address (Give address to which approve	ed copy of this form is to be sent)
	If well produces oil or liquids, give location of tanks.	Pipeline Inghead Gas(Y) or Dry Gas a Corporation Unit Sec. Twp. Pge. A (25) 188 (30E)	P.O. Box 1510-Midla Address (Give address to which approve Box 6666, Odessa, Tr Is gas actually connected? When Yes 9.	nci, Texas ed copy of this form is to be sent) exas
IV.	If this production is commingled wit COMPLETION DATA	h that from any other lease or pool, g	New Weil Workover Deepen	Plug Back Same Restv. Diif. Restv.
	Designate Type of Completio	n - (X) X Date Compl. Ready to Prod.	X Total Depth	P.B.T.D.
	Date Spudded 6-28-70	9-30-70	3594 '	3568'
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay 2944	Tubing Depth 2930 '
	3486 GR Perforations	Queen		Depth Casing Shoe 3315
	2944-2948', 2951-3	2955', 3150-3157', 3 TUBING, CASING, AND	CEMENTING RECORD	
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
	10"	8-5/8" 20# 53" 14#	712'	600
	8"	2 3/8°	2930	
			i	and must be equal to or exceed top allow-
v	. TEST DATA AND REQUEST FO	OM ALLOWABLE (Test must be a) able for this de	pth or be for full 24 hours) Producing Method (Flow, pump, gas lif	
	Date First New Oil Run To Tanks 9-30-70	Date of Test 10-1-70	Producing Marinoa (ribu, pump, gas is) Pumping	
	9-30-70 Length of Test	Tubing Pressure	Casing Pressure	Choke Size
	24		Water-Bbis.	Gas-MCF
	Actual Prod. During Test 208	011-Bbis. 78	30 BLW	78
	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
V	I. 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 OCT 2 1970 BY U. A. Bresset	
	Eddie M. Mahfood	Engineer	OIL AND GAS INSPECTOR TITLE OIL AND GAS INSPECTOR This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly crilled or deepened well, this form must be accompanied by a tabulation of the deviation 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 pwner,	
		iile) -2-70		
(Date)			Fill out only Sections 1, 11, 11, 11, 11, 11, 11, 11, 11, 11,	

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Fill out only Sections I. H. HI, and VI for changes of Swhee, well name or number, or transporten or other such change of condition. Separate Forms C-104 must be filed for each pool in moltiply completed wells.