	DISTRIBUTION SANTA FE / FILE / U.S.G.S. LAND OFFICE	TRIBUTION   NEW MEXICO OIL CONSERVATION COMML. ON     FE   /     Image: state sta		Form C-104 Supersodes Old C-104 and C-116 Elloctive 1-1-65 GAS	
	TRANSPORTER OIL I   GAS 1   OPERATOR I		RECEIVED		
1.	Operator JUL 2 3 1973				
	Midwest Oil Corporation V				
	1500 Wilco Building Midland, Texas 79701 ARTESIA. OFFICE				
	Reason(s) for filing (Check proper ) New Well	Change in Transporter of:	Other (Please explain) Authorization to	tranoport	
	Recompletion	Oll Dry C Casinghead Gas Cond			
	If change of ownership give name and address of orevious owner				
H.	DESCRIPTION OF WELL AN	D LEASE Well No. Pool Name, Including	Formation Kind of Lease		
	South Empire Deep Uni		itting of Locast	Lease No. 1 or Fee Federal NM 0560401	
	Unit Letter <u>F</u> ; <u>18</u>	30 Feet From The North L	ine and <u>1639</u> Feet From T	The West	
	Line of Section 6	Fownship 18S Range	29E , NMPM, Eddy	County	
111.	DESIGNATION OF TRANSPO	RTER OF OIL AND NATURAL G	AS		
• • • •	Name of Authorized Transporter of Oil or Condensate X Address (Give address to which approved copy of this form is to be sent)				
	Amoco Pipeline Co.   2300 Continental Natl Bk Bldg. Ft. Worth, Tex. 76102     Name of Authorized Transporter of Casinghead Gas   or Dry Gas X     Address (Give address to which approved copy of this form is to be sent)     Western Gas Interstate Co.				
	**Phillips Petroleum	Co.	Address (Give address to which approv Fidelity Union Tower, D Frank Phillips Bldg. Ba	allas, Tex. 75201 rtlesville, Okla.	
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Pge. F 6 18 29	Is gas actually connected? Whe Ves	** 8-30-72- 7-11-73	
IV.	t this production is commingled with that from any other lease or pool, give commingling order number:				
	Designate Type of Comple		New well workover Deepen	Plug Back Same Res'v. Diff. Rea'v.	
	Date Spuddød	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
	Elevations (DF, RKB, RT, GR, etc.,	Name of Producing Formation	Top Cil/Gas Pay	Tubing Depth	
	Perforations Depth Casing Shoe				
	TUBING, CASING, AND CEMENTING RECORD				
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
v	TEST DATA AND REQUEST	FOR ALLOWARIE (Test must be			
ī	EST DATA AND REQUEST FOR ALLOWABLE   (Test must be after recovery of total volume of load oil and must be equal to or exceed top allow- able for this depth or be for full 24 hours)     Date First New Cil Run To Tanks   Date of Test				
	Date / Jechtew Christian for Fairke		Producing Method (riow, pump, gas tijt	, etc.)	
ſ	Length of Test	Tubing Pressure	Casing Pressure	Choks Sizs	
	Actual Prod. During Test	Oil-Bha.	Water-Bble.	Gas - MCF	
_	GAS WELL				
ſ	Actual Prod. Test-MCF/D	Length of Test	Bbis. Condensate/MMCF	Gravity of Condensate	
	Testing Method (pitos, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Chox Size	
	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 JUL 30 1973 BY, 19 TITLE OIL AND BAS INSPECTOR		
C					
	ponnie t		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		
•	(Sifnature) Production Clerk		tests taken on the well in accordence with RULE 111. All sections of this form must be filled out completely for allow-		
	(Title) 7-20-73		All sections of this form must be filled out completely for allow- able 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.		
	BH:ng 7-20-73		1	be filed for each pool in multiply	