GTATE OF NEW MEXICO DEDGY AND MINERALS DEPARTMENT			Form C-104 Revised 10-1-78
		ATION DIVIS ON DX 2088	
IANTATE TILE	RECEIVED BY	W MEXICO B 7501	
	JUL 22 1985		
TRANSPORTER OIL	O. C. D.	DR ALLOWABLE	
PROBATION PFICE	ANTHER ZOFIEN TO TIANS	SPORT OIL AND NATURAL GAS	
Cymrator Tenneco Oil	Company 🖌		
Address 7990 IH 10 W	est, San Antonio, Tx 7823	0	
Reason(s) for liling (Check proper bo		Other (Please explain)	
New Well	Change in Transporter of: Oil Dry G	To add new gas	purchaser
Change in Ownership	Casinghead Gas Conde		
If change of ownership give name and address of previous owner			•
DESCRIPTION OF WELL AND	LEASE	ormation Kind of Leas	
State JL 36	5 South Leo=7R-Q	GB-SA State, Federa	Ctato
E 231	0 Feet From The north Lin	990	west
Unit Letter:	190	29F Edu	dv
		, NMPM,	County
DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL GA	Address (Give address to which approv	ved copy of this form is to be sent)
The Permian Name of Authorized Transporter of Ca	Singhead Gas X or Dry Gas	Address (Give address to which approv	
Phillips Petroleum Att		4000 Penbrook, Odessa, TX 79760	
If well produces oil or liquids, give location of tanks,	Unit Sec. Twp. Rge. E 36 18S 29E	yes 7-18-85	
If this production is commingled wi . COMPLETION DATA	th that from any other lease or pool,	give commingling order number:	
Designate Type of Completi	on - (X)	New Well Workover Deepen	Plug Back Same Restv. Diff. Restv.
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Elevations (DF, RKB, RT, GR, etc.)	"ame of Producing Formation	Top Oil/Gas Pay	Tubing Depth
Perforations		<u>.</u>	Depth Casing Shoe
	TUBING, CASING, AND	CEMENTING RECORD	Post ID-3
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	AL CT' PP
. TEST DATA AND REQUEST F		fter recovery of total volume of load oil (and must be equal to or exceed top allou-
OIL WELT, Date First New OII Run To Tanks	Date of Test	pth or be for full 24 hours) Producing Nothod (Flow, pump, gas lif	i, eic.)
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbis.	Water - Bbls.	Gas-MCF
		<u> </u>	
GAS WELL			Gravity of Condensate
Actual Frod. Teet-MCF/D	Length of Test	Bbls. Condensate/MMCF	
Teeting Method (pitot, back pr.)	Tubing Presewe (shut-in)	Cosing Pressure (Shut-in)	Choke Sixe
CERTIFICATE OF COMPLIANCE		OIL CONSERVATION DIVISION	
I hereby certify that the rules and regulations of the Oll Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief,		APPROVED	
		BYBY	Clainers Les A C
٨	\bigcirc .		or District II oupervisor District It
Jusan Relt		This form is to be filed in c If this is a request for allow	able for a newly dillad or despend
(Signature) Accounting Analyst		well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.	
(7 sta)		able on new and recompleted we	t be filled out completely for allow-
7-18-85 (Dute)		well name or number, or transport	, III, and VI for changes of owner, er, or other such change of condition.
110		Separate Forms C-104 must completed wells.	be filed for each pool in multiply