1.	Reason(s) for filing (Check proper box) New Well Recompletion	REQUEST F RECEIVED BY AUTHORIZATION TO TRAINAPR 3 0 1985 O. C. D. ARTESIA, OFFICE Ing, Inc. Roswell, NM 88201 Change in Transporter of: Oil Dry Gas	Other (Please explain) Test Allowable sell 185 bbls	- Permission to	
	Change in Ownership If change of ownership give name and address of previous owner DESCRIPTION OF WELL AND I Lease Name Artesia State Location Unit Letter C 33	Casinghead Gas Condens EASE Well No. Pool Name, Including Fo 1 Artesia, Quee O Feet From The North Line	rmation Kind of Lease State, Federal	or Fee State V1404	
III.	Line of Section 13 Tow DESIGNATION OF TRANSPORT Name of Authorized Transporter of Oil	ER OF OIL AND NATURAL GA	Address (Give address to which approve		
	Navajo Refining Com Name of Authorized Transporter of Cas If well produces oil or liquids, give location of tanks. If this production is commingled with	Unit Sec. Twp. Rge. C 13 18 27	P.O. Drawer 159, Art Address (Give address to which approve Is gas actually connected? When	ed copy of this form is to be sent)	
IV.	COMPLETION DATA Designate Type of Completio	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.	
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
	4/13/85 Elevations (DF, RKB, RT, GR, etc.) 3584 GR	Name of Producing Formation Penrose	Top Oil/Gas Pay 1494	Tubing Depth 1465	
	Perforgions 1495-1518 24 hole		1 1 1 3 1	Depth Casing Shoe	
	TUBING, CASING, AND CEMENTING RECORD				
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
V.	OIT WET I able for this dept		fter recovery of total volume of load oil and must be equal to or exceed top allow- pth or be for full 24 hours) Producing Method (Flow, pump, gas lift, etc.)		
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
	Actual Prod. During Test	Oil-Bbia.	Water - Bbls.	Gae - MCF	
	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	
VI	CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION		
V			APPROVED APR 30 1985		
	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.		BY Original Signed By Les A. Clements		
	\mathcal{A}		TITLE Supervisor District II		
	J. Port ().		This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepened		
		President Signature)		well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.	
	(Title) 4/30/85 (Date)		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.		