	. <b>-</b>	-	a a state a state
NO. OF COTIES AFCEIVED			
DISTRIBUTION SANTA FE		NEW MEXICO OIL CONSERVATION COMMISSION	
FILE /-	REQUEST	FOR ALLOWABLE AND	Supersedes Old C-104 and C-110 Effective 1-1-65
U.S.G.S.	AUTHORIZATION TO TR	ANSPORT OIL AND NATURAL G	AS
TRANSFORTER OIL GAS			REGEIVED
OPERATOR 4			
Operator Mark Production C Address	ompany		
3340 Republic Ban Reoson(s) for filing (Check proper l	<u> Building, Dallas, Texas</u>	<u>75201</u>	
New Well	Change in Transporter of:	Other (Please explain) Change in name	of Operator only from
Recompletion Chunge in Ownership	Oll Dry Go		ng Company, effective
ê	Casinghead Gas Conde		
If change of ownership give name and address of previous owner		g name only (same owner	ship).
II. DESCRIPTION OF WELL AN	D LEASE   Well No.   Pocl Name, Including F	ormation Kind of Lease	Lease No.
Angell-State	3 East Millma	in Seven Rivers State, Federal	
	, $650$ Feet From The Lir	ne and <u>1,650</u> Feet From Th	neS
Line of Section 21	Township 19S Range	28E , NMFM, EC	ldy County
II. DESIGNATION OF TRANSPO	RTER OF OIL AND NATURAL GA		······································
The Permian Corp	oration	Address (Give address to which approve P. O. Box 3119, Mid	lland. Texas
Name of Authorized Transporter of a Phillips Petroleum	Casinghead Gas X or Dry Gas	Address (Give address to which approve	d copy of this form is to be sent)
If well produces oil or liquids,	Unit Sec. Twp. Rge.	Bartlesville, Oklahor	
give location of tanks.	JZ 21 19 28 with that from any other lease or pool,	give commingling order number:	March, 1962
V. COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.
Designate Type of Comple	· · · · · · · · · · · · · · · · · · ·		· · · ·
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Elevations (DF, RKB, RT, GR, etc.	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
Perforations	· · · · · · · · · · · · · · · · · · ·	1	Depth Casing Shoe
		CEMENTING RECORD	·····
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
······································			
V. TEST DATA AND REQUEST OIL WELL	able for this de	fter recovery of total volume of load cil an pth or be for full 24 hours)	· · ·
Date First New Cil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift,	etc.)
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water - Bbla,	Gas-MCF
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
/I. CERTIFICATE OF COMPLIA	NCE	OIL CONSERVAT	TION COMMISSION
I have by contify that the miles on	t regulations of the Oil Conservation	APPROVED 1	<u>گان</u>
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_ LU. C. Gressett	
		TITLE	
The market		This form is to be filed in compliance with RULE 1104.	
(Signature)		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	
Nell M. Heflin, Assistant Secretary		tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for allow-	
(Title) January 10, 1968		able on new and recompleted well Fill out only Sections I. II.	a. III, and VI for changes of owner,
· · · · · · · · · · · · · · · · · · ·	Date;	well name or number, or transporter	nor other such change of condition. be filed for each pool in multiply