	NO. OF COFIES RECEIVED DISTRIBUTION SANTA FE		NSERVATION COME ION OR ALLOWABLE AND NSPORT OIL AND NATURAL GA	Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65
	LAND OFFICE TRANSPORTER GA3			00T 1 3 18 51
1.	PRORATION OFFICE			
	Robert N. Enfield / Ailress P. O. Box 2431 Santa Fé Reoson(s) for filing (Check proper box) New Well Incompletion	e, NM 87501 Change in Transporter of: Cil Dry Gas Cuatingherd Gas Condens		
	If change of ownership (ive name and address of previous owner			
11.	DESCRIPTION OF WELL AND LE Lease Name Bunnel Federal days of Location Unit Letter R 1650	Lease No. Well No. Pool Ada 1 Indiar	e, mersand i onnanon	Kind of Lease State, Federal or Fee Federal .e East
	Line of Section 18 Towns	ship 21 South Bange 2	23 East , NMPM, E	ddy Ccunty
I II .	DESIGNATION OF TRANSPORTE	OF OIL AND NATURAL GA	S Address (Give address to which approve	d copy of this form is to be sent)
	The Permian Corporation Name of Authorized Transporter of Casim Marathon Oil Company, Op Plant and Gathering Syst If well produces oil or liquids, give location of tarks.	cherd Gas or Dry GasX berator, Indian Basin Ga Chit Sec. Twp. Ege. J 18 21 23	Is gas actually connected? When	d copy of this form is to be sent)
IV.	If this production is commingled with COMPLETION DATA Designate Type of Completion	Oil Well 🛛 Gas Well	give commingling order number:	Plug Back Same Resty. Diff. Resty.
		Date Compl. Ready to Prod.	Total Depth 7500'	P.B.T.D. 7157'
	1/30/65 Elevations (DF, RKB, RT, GR, etc.) 4418' GL Perforations 7126-33;	Cisco Canyon Dolo	Tep Cil/Gas Pay 7126'	Tubing Depth 7038 ¹ Depth Casing Shoe
	TUBING, CASING, AND CEMENTING RECORD			
	HOLE SIZE	CASING & TUBING SIZE 13-3/8" casing	DEPTH SET	SACKS CEMENT
		9-5/8" "	1532'	775 "
	7-7/8"		1	
V.	TEST 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) OIL WELL Producing Method (Flow, pump, gas lift, etc.)			
	Date First New Oil Run To Tanks	Date of Test	producing Method (1 tou, pump, gut to)	A star ton
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size North A
	Actual Prod. During Tes	Cil-Bbis.	Water - Bbls.	Gas-MCF Ju V
	GAS WELL Actual Prod. Test-MCF /D	Length of Test	Bbls, Condensate/MMCF	Gravity of Condensate
	Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size
	CERTIFICATE OF COMPLIANC	F	OIL CONSERVA	TION COMMISSION
VI	I hereby certify that the rules and re	gulations of the Oil Conservation	APPROVED OCT 1 3 1981 . 19	
	above is true and complete to the best of my knowledge and belief.		TITLE SUPERVISOR, DISTRICT I	
	Robert N. Enfield (Signal	Vice	This form is to be filed in c If this is a request for allow well, this form must be accompa- tests taken on the well in accor	compliance with RULE 1104. Table for a newly drilled or deepened hied by a tabulation of the deviation dance with RULE 111.
	Operator / (Till	ie)	able on new and recompleted we	at be filled out completely for allow- ils. . III, and VI for changes of owner, er or other such change of condition.

	(Date)
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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.