	JISTRIBUTION		CONSERVATION CO		Form C+104 Supertedes Of	d C-104 and C-1	
	U.S.G.S. LAND OFFICE	AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS RECEIVED					
1.	GAS / OPERATOR / PROBATION OFFICE	MAY 1	MAY 18 1977				
		SANTO COMPANY V D.C.C.					
	MONSANTO COMPANY       ARTEBIA, OFFICE         Address       1330 Midland National Bank Tower, Midland, Texas 79702         Reason(s) for filing (Check proper bax)       Other (Please explain)         New Well       X         Change in Transporter of:       Other (Please explain)         Recompletion       Otil         Change in Ownership       Casinghead Gas						
	change of ownership give name ad address of previous owner						
И.	DESCRIPTION OF WELL AN	D LEASE	·				
	LONE TREE			Kind of Lease State, Federal or Fe		Lease No.	
	Location					L-326	
	Unit Letter K ; ]	.980 Feet From The South	ine and <u>1980</u>	Feet From The	West		
	10	- 010	07-	Edder			
		Township ZIS Range	<u>27E</u> , NM3	M, Dudy		County	
111.	DESIGNATION OF TRANSPO	RTER OF OIL AND NATURAL G					
	Name of Authorized Transporter of Oilor Condensate XAidress (Give address to which approved copy of this form is to be sent)THE PERMIAN CORPORATIONPO Box 3119, Midland, Texas 79702						
	Name of Authorized Transporter of					o he sent!	
	Name of Authorized Transporter of Casinghead Gas or Dry Gas X. Address (Give address to which approved copy of this form is to be ser EL PASO NATURAL GAS COMPANY PO Box 1492, El Paso, Texas						
	If well produces oil or liquids, Unit Sec. Twp. P.ge. is gas actually connected? When						
	- 	K 13 21S 27E	Yes		/17/77		
IV.	If this production is commingled with that from any other lease or pool, give commingling order number:						
	Designate Type of Comple	tion $-(X)$ 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			·	
	10/4/76	1/2/77	11,870	P.B.	т.р. <b>10,6</b> 50		
	Elevations (DF, RKB, RT, GR, etc.	, Name of Producing Formation	Top Oil/Gas Pay	Tubir	ng Depth	***	
-	RKB 3178 Perforations	Wolfcamp	9312		9114		
	9674-82 & 93	Depth Casing Shoe 11,870					
t		D CEMENTING RECORD					
-	HOLE SIZE			SET	SACKS CEMENT		
H	<u>17½''</u> 12½''	<u>13 3/8''</u> 9 5/8''		26	750		
ŀ	8 3/4"	<u> </u>	30		<u>2095</u> 1150	······································	
				<u> </u>	1150	<b></b>	
	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 Oil 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-Bbla.	Water-Bbis.	Gα <b>s</b> -	MCF		
	·······						
						17.	
· · · ·	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MM	CF Gravit	ty of Condensate	<del></del>	
	400	24 Hrs.	26		60	C (M	
	Testing Mothod (pitot, back pr.) Back Pr.	Tubing Pressure (Shut-in)	Casing Pressure (Shu	t-in) Choke			
	-	1700	Pkr.		1 11		
vi. C	ERTIFICATE OF COMPLIA	NUL	01L	CONSERVATION			
		regulations of the Oil Conservation	APPROVED	MAY 2 0 197	, 1	9	
		with and that the information given he best of my knowledge and belief.	BY W.a. Susset				
				ANDERVISOR DISTRICT I			
	1 CPAL	TITLE					
	11 Cillie	14	o be filed in complia	4			
	(31)	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					
	Regional Production		tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for allow-				
	۲۵ 5/17/77	able on new and recompleted wells.					
5/1//// (Date) Fill out only Sections I, II, III, and VI for ci well name or number, or transporter, or other such che							
	·	a C-104 must be fil	ed for each por	ol in multiply			
		·	li .completed wells	* =			

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