NO. OF CUPICS RECEIVED			-	
DISTRIBUTION	NEW MEXICO OIL CO	OR A LOWRELE VED BY	Form C -104	
SANTA FE			Supersedes Old C-104 and C+110 Effective 1-1-55	
FILE		AND		
U.S.G.S.	AUTHORIZATION TO TRAN	ISPORT OILMAN RATURAL G	AS	
OIL /		0. C. D.		
TRANSPORTER GAS		ARTESIA, OFFICE		
OPERATOR U PRORATION OFFICE	-			
Operator	1/			
MONSANTO OIL COMPANY				
Addresa	Queter Millerd Torres 70	701		
1300 One First City Reason(s) for filing (Check proper box	Center, Midland, Texas 79	Other (Please explain)		
New Well	Change in Transporter of:			
Recompletion	Oil Dry Gas			
Change in Ownership	Casinghead Gas Condens			
If change of ownership give name and address of previous owner				
. DESCRIPTION OF WELL AND	LEASE		·	
Lease Name	Well No. Pool Name, Including For	rmation Kind of Leas		
Burton Flat Deep Uni	t 24 Wildcat - Bon	e Spring	l or Fee State L-2766	
	26 Feet From The North Line	and 660 Fact From	The East	
Unit Letter A : 4	Feet From The NOTEN Line	and 000 Feet r tom	Inc	
Line of Section 2 To	wnship 21S Range	<u>27е , ммрм, е</u>	ddy County	
	TTED OF OFF AND MATHERAT CA	2		
Name of Authorized Transporter of O	TER OF OIL AND NATURAL GAS	Address (Give address to which appro	ved copy of this form is to be sent)	
The Permian Corp			PO Box 1183 Houston, Texas 77001	
The Permian COTP Name of Authorized Transporter of Casinghead Gas X or Dry Gas		Address (Give address to which approved copy of this form is to be sent)		
Phillips Petroleum	Phillips Petroleum Corp. 4001 Penbrook Odessa, Texas 79762			
If well produces oil or liquids,	Unit Sec. Twp. Pge.			
give location of tanks.	<u>A 2 215 27E</u>	yes	5/24/84	
If this production is commingled w	ith that from any other lease or pool, i	give commingling order number:		
V. COMPLETION DATA		New Well Workover Deepen	Plug Back   Same Res'v. Diif. Res'v.	
Designate Type of Complet		X I	P.B.T.D.	
Date Spudded	Date Compl. Ready to Prod.	Total Depth	5800	
4/4/84	5/20/84 Name of Producing Formation	6000 Top Cil/Gas Pay	Tubing Depth	
Elevations (DF, RKB, RT, GR, etc.) 3195 RKB	Bone Spring	5454	-6000-5365	
Perforations			Depth Casing Shoe	
5454 - 54	<u> </u>		6420	
	TUBING, CASING, AND	CEMENTING RECORD	SACKS CEMENT	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	600	
17 1/2	<u> </u>	<u> </u>	2600	
11 7 7/8	5 1/2	6000	900	
<i></i>	27/7	6268		
V. TEST DATA AND REQUEST	FOR ALLOWABLE (Test must be a)	fter recovery of total volume of load of pth or be for full 24 hours)	l and must be equal to or exceed top allow-	
OIL WELL Date First New Oil Run To Tanks	able for this ae	Producing Method (Flow, pump, gas	lift, etc.) Fred H	
	5/20/84	Flowing	101-1-84 vik	
5/24/84 Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
21/10 hrs	350	0	12/64	
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF	
	14 105	0	127	
GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
			Chaka Cia-	
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Chokə Size	
			ATION COMMISSION	
/I. CERTIFICATE OF COMPLIANCE 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.		OIL CONSERVATION COMMISSION		
		APPROVED MAY 19 19		
		Original Signed By BYLoslie A. Claments		
above is true and complete to	rue bear of my knowledfo and perfor-	Supervisor		
Q _		TITLE		
TIPR		This form is to be filed in	a compliance with RULE 1104.	
1000			owable for a newly drilled or deepuned panied by a tebulation of the deviation	
	managar	I toots taken on the well in acc	ordance with North title	
Regional Productio	n Manager Tille)	able on new and recompleted	nust be filled out complately for allow wells.	
Mar 05 1004	-	Fill out only Sections I.	II. III, and VI for changes of owner	

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