	HO. OF COPIES REC	3				
	DISTRIBUTION					
	SANTA FE	1				
	FILE					
	U.S.G.S.					
	LAND OFFICE					
	TRANSPORTER	ō				
		GAS				
	OPERATOR					
I.	PRORATION OF					
	Operator					
	Morris R. Antwe					
	Address					
	Box 2010, Hobbs Reason(s) for filling (Check proper box)					
	1 7					
	New Well					
	Recompletion	Щ				
	Change in Ownership					

	SANTA FE / FILE U.S.G.S. LAND OFFICE	REQUEST	CONSERVATION COMMISSION FOR ALLOWABLE AND ANSPORT OIL AND NATURAL	Form C-104 Supersedes Old C-104 and C-116 Effective 1-1-65 GAS		
ı.	TRANSPORTER OIL GAS OPERATOR PRORATION OFFICE Operator					
	Morris R. Antwe	il		RECEIVED		
		Change in Transporter of: Oil Dry Ga Casinghead Gas Conder	≒	SEP 13 1971 D. C. C. ARTESIA, GEFT		
	If change of ownership give name					
'T	DESCRIPTION OF WELL AND	LEACE				
	Lease Name Little Jewel Com.	Well No. Pool Name, Including Fo				
	Location F 198	O North		West		
	31		Feet From P.7-E , NMPM,	Eddy County		
ιI.	DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Cil or Condensate X Address (Give address to which approved copy of this form is to be sent)					
	The Permian Cor	poration	Box 3119 Housto	n, Texas 77001		
	Name of Authorized Transporter of Cas Llano, Inc.	inghead Gas or Dry Gas	Address (Give address to which appropriate Box 1320 Hobbs.	New Mexico 88240		
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge.		hen 9-30-91 10-4-71 16 Sept. 71		
	If this production is commingled wit	th that from any other lease or pool,	·	pending f vot		
V.	Designate Type of Completion	/V\ '	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.		
	Date Spudded	Date Compl. Ready to Prod.	X Total Depth	P.B.T.D.		
	16 Jan. 71 Elevations (DF, RKB, RT, GR, etc.)	20 Apr. 71 Name of Producing Formation	11,818 Top Oil/Gas Pay	Tubing Depth		
	3189 GL	Strawn	10,362'	10,4522-3/3" Depth Casing Shoe		
	10,362' 10,440' 10 holes			11,818'		
	HOLE SIZE	TUBING, CASING, AND	DEPTH SET	SACKS CEMENT		
	17-1/2"	13-3/8"	373'	380 sx.		
	12-1/4"	9-5/8"	2600 '	950 sx.		
	8-3/4"	7 11	10708	1170 sx.		
v.	6-1/8" TEST DATA AND REQUEST FO	4-1/2" liner OR ALLOWABLE (Test must be as	,	and must be equal to or exceed top allow-		
•	TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL Other First New Oil Run To Tanks Other Date of Test Other Producing Method (Flow, pump, gas lift, etc.)					
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size		
	7.00		Water - Bbls.	Gas-MCF		
	Actual Prod. During Test	Oil-Bbls.	water - Date.	Gds-MCr		
	GAS WELL 5/6/72 6/2					
	Actual Prod. Test-MCF/D 5758	Length of Test 1 hr.	Bbls. Condensate/MMCF 41.5	Gravity of Condensate 580		
	Testing Method (pitot, back pr.) Back Pressure	Tubing Pressure (shut-in) 4006 psig	Casing Pressure (Shut-in)	Choke Size 17/64"		
/I.	CERTIFICATE OF COMPLIANCE	·	<u> </u>	ATION COMMISSION		
	I hereby certify that the rules and r Commission have been complied w above is true and complete to the	egulations of the Oil Conservation ith and that the information given	APPROVED OCT 1971, 19 BY OIL AND GAS INSTITUTE This form is to be filed in compliance with RULE 1104. 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			
	Cm Cligad	Slive)				
	Agent (Title)		tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for allowable on new and recompleted wells.			
	10 Sept. 71 (Da	te)	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.			