1			
DISTRIBUTION SANTA FE			Form C-104
FILE	REQUES	ST FOR ALLOWABLE AND	Supersedes Old C-104 and C-11 Effective 1-1-65
U.S.G.S.	AUTHORIZATION TO T	RANSPORT OIL AND NATURAL G	
LAND OFFICE		RANS, ORT OIL AND NATURAL G	42
TRANSPORTER OIL GAS			
OPERATOR			
PRORATION OFFICE			
Operator	NZOIL COMPANY	· · · · · · · · · · · · · · · · · · ·	
Address	D. Drawer 1828 - Midland,	Towns 70701	
Reason(s) for filing (Check proper	box)	Other (Please explain)	· · · · · · · · · · · · · · · · · · ·
New Well Recompletion	Change in Transporter of:	Notice of spli	t connection for dry gas
Change in Ownership		Gas densate	
If change of ownership give nam and address of previous owner _	e		
DESCRIPTION OF WELL AN Lease Name	Well No. Pool Name, Including	Formation Kind of Lease	Federal Lease No.
Gulf Federal Com.	2 South Carls	bad Strawn Gas State, Federal	i caciai –
Location			Com. Agr. SW-612
Unit Letter L ;;	1980 Feet From The South 1	ine and990 Feet From Th	-
Line of Section 6	Township 23-S Range	27-Е , ММРМ, Н	Eddy County
DESIGNATION OF TRANSPO	DRTER OF OIL AND NATURAL O	FAS	
Name of Authorized Transporter of	Oil or Condensate X	Address (Give address to which approve	d copy of this form is to be sent)
The Permian Corpora Neme of Authorized Transporter of		P.O. Box 1183 - Houston,	Texas 77001
Llano, inc.	See Porcent	Address (Give address to which approve	I come of this form is to be send
Transwestern Pipe Li	ne Company Below. Unit Sec. Twp. Fge.	P.O. Drawer 1320 - Hobbs P.O. Box 2521 - Houston, Is gas actually connected?	Texas 77001
If well produces oil or liquids, give location of tanks.	L 6 23-S 27-I	E Yes Tra	Llano, Inc. on 1-2-73. Inswestern on 4-7-72.
f this production is commingled COMPLETION DATA	with that from any other lease or pool	l, give commingling order number:	
Designate Type of Comple	tion - (X)	New Well Workover Deepen	Plug Back   Same Res'v. Diff. Res'v.
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Elevations (DF, RKB, RT, CR, etc.	; Name of Producing Formation	Top Cil/Gas Pay	Tubing Depth
Perforations	·		
· · · · · · · · · · · · · · · · · · ·			Depth Casing Shoe
HOLE SIZE	TUBING, CASING, AN CASING & TUBING SIZE	D CEMENTING RECORD	
	eriod for approximately o	DEPTH SET	SACKS CEMENT
<u> </u>	n = 60.6706% L1a	nb, Inc. = 39.3294% Str	สพท
* After Balancing Per	ciфd.		
Transwestern Strawn	= 80.8941% Lla	no, Inc. = 19.1059% Stir	awn
TEST DATA AND REQUEST		after recovery of total volume of load oil and lepth or be for full 24 hours)	l must be equal to or exceed top allow-
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, a	etc.)
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Advert Device Text			
Actual Prod. During Test	Oll-Bbls.	Water-Bbls. C	Gas - MCF
GAS WELL acriage	Factor 0.82 1	Q 11 7 8 5	
Actual Prod. Test-MCF/D	Length of Test	- Y Z-Ø.S Bble. Condenagte/MMCF	aravity of Condensate
<b>*</b>			
Testing Method (pitot, back pr.)	Tubing Pressure (Ehut-in)	Casing Pressure (Shut-in) C	hoke Size
ERTIFICATE OF COMPLIA	NCE	OIL CONSERVATI	ON COMMISSION
		APPROVED JAN 15 1973	10
ommission have been complied	regulations of the Oil Conservation with and that the information given he best of my knowledge and belief.		
		TITLE ML AND GAS INSPECTO	IÃ
	)	This form is to be filed in com	
Tey J Christin Roy R. Johnson		If this is a request for allowable for a newly drilled or deepened	
(Signature)		well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.	
Óffice Manager (Tiule)		All sections of this form must be filled out completely for allow-	
January 12, 1973.		able on new and recompleted wells. Fill out only Sections I. II. III, and VI for changes of owner,	
	)ate)	well name or number, or transporter, o	or other such change of condition.
ويهدوه والسر ومستوران وم		Separate Forms C-104 must be completed wells.	filed for each pool in multiply