	U.S.G.S.	.THOR	UZATION	TO TO	AND	NI ATUDA	Lifective 1-	1-65		
	IRANSPORTER OIL !	JTHORIZATION TO TRANSPORT OIL AND WATURAL GAS  RECEIVED								
1.	OPERATOR   PRORATION OFFICE	JUL 3 0 1975								
	SAMEDAN OIL CORPORATION  O.C.C.  Address									
	2207 Wilco Building, Midland, Texas 79701									
	Reason(s) for filing (Check proper box,	<u> </u>		12104	Other (P	lease explain)	<del></del>			
	New Well	_								
	Recompletion Oil Dry Go				ıs 🔲					
	Change in Ownership	Casinghead	Gas	Conde	nsate					
	If change of ownership give name and address of previous owner									
II.	DESCRIPTION OF WELL AND				- · · · · · · · · · · · · · · · · · · ·					
	Lease Name	T T	ool Name, li Indesign			Kind of L		Lease No.		
	Carlsbad State Com.	1 8		Strav		State, Fe	deral or Fee State	L-4241		
	Unit Letter B; 660 Feet From The North Line and 1980 Feet From The East									
	Line of Section 34 Tow	mship 23-S	F	Range 2	6-E , A	імрм,	Eddy	County		
III.	DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  Name of Authorized Transporter of Oil or Condensate Address (Give address to which approved copy of this form is to be sent)									
	Unknown at present									
	Name of Authorized Transporter of Casinghead Gas or Dry Gas				Address (Give address to which approved copy of this form is to be sent)					
	El Paso Pipeline Company			7=			Midland, Texas	79701		
	If well produces oil or liquids, give location of tanks.	Unit Sec.	Twp.	Rge. 26-E	Is gas actually cor		Approx. 9/1/7			
	If this production is commingled wit	·								
IV.	COMPLETION DATA	n that from any	otner lease	e or pool,	give comminging	order number:	<del></del>			
	Designate Type of Completio		Well G	ias Well X	New Well Works	over Deepen	Plug Back   Same F	les'v. Diff. Res'v.		
	Date Spudded	Date Compl. Rea	-		Total Depth 11,805		P.B.T.D.			
	2/26/75		7/24/75				11,7941			
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation			Top Oil/Gas Pay		Tubing Depth	- '		
	3292' G.L.	Strawn			10,354'		Depth Casing Shoe	Depth Casing Shoe		
	Perforation 354' to 10,370'						11,794			
	TUBING, CASING, AND CEMENTING RECORD									
	HOLE SIZE	CASING & TUBING SIZE			DEPTH SET		SACKS C	SACKS CEMENT		
	17 1/2"	12 3/4"		503!		70	700 sx.			
	11	7"			5,477		3,05	3,054 sx.		
	7_7/8"	4 1/2" 2 3/8"			11,794!		50	500 BX.		
v.	2 3/8"  10,270  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									
	OII. WELL Date First New Oil Run To Tanks	Date of Test	able	for this de	pth or be for full 24 Producing Method		s lift, etc.)			
	Length of Test	Tubing Pressure			Casing Pressure		Choke Size	Choke Size		
	Actual Prod. During Test	Oil-Bbls.			Water - Bbls.		Ggs-MCF	Gas - MCF		

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pur	Producing Method (Flow, pump, gas lift, etc.)		
Length of Test	Tubing Pressure	Casing Pressure	Choke Size		
Actual Prod. During Test	Oil-Bbis.	Water - Bbls.	Gas - MCF		

GAS WELL									
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate						
492	4	•3	52.3						
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size						
Back Pressure	2517	Packer	18/64"						

## VI. 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.

(Signature)

William S. McCuen -Production Superintendent (Title)

> July 28, 1975 (Date)

OIL CONSERVATION COMMISSION SEP 2 1975

2 1975

SUPERVISOR, DISTRICT II TITLE .

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 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.

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.