ſ	NO OF COPIES RECEIVED				
-	DISTRIBUTION	NEW MEXICO OIL CO	NSERVATION COMMISSION	Form C-104	
Ì	SANTA FE		OR ALLOWABLE	Supersedes Old C-104 and C Effective 1-1-55	
Ī	FILE I V		AND	RECEIVED	
	U.S.G.S.	AUTHORIZATION TO TRAN	ISPORT OIL AND NATURAL G	AS	
	LAND OFFICE			MAR 1 4 1980	
	TRANSPORTER GAS 1				
ŀ	OPERATOR /			O. C. D.	
1.	PRORATION OFFICE	/		ARTESIA, OFFICE	
	Operator DIANERO ODERATERIAS COMPANY / (To become officiative on March 1, 1080)				
	DINERO OPERATERING COMPANY (To become effective on March 1, 1980)				
	Aurreas Post Office Box 10	Post Office Box 10505, Midland, Texas 79702			
i t		eason(s) for filing (Check proper box) Other (Please explain)			
	the Vell				
	Recompletion	Oil Dry Gas			
	Change in Ownership	Casinghead Gas Condens	ate		
i				Midland, Texas 70702	
	change of ownership give name J. C. Barnes Oil Company, Post Office Box 505, Midland, Texas 70702 nd address of previous ownerJ. C. Barnes Oil Company, Post Office Box 505, Midland, Texas 70702				
	AND TOTAL OF WITH AND I	ON OF WELL AND LEASE			
In. DESCRIPTION OF WELL AND DENSE Mell No. Pool Name, including Formation Kind of Lease Mell No. Pool Name, including Formation State, Federal or Feeppe					
Big Chief Comm. 3 Dublin Ranch Morrow State, rederd				or Feefee	
	Le ration		1000	Fact	
	Unit Letter ; 198	0Feet From TheSouthLine	and1980 Feet From 1	he <u>Last</u>	
	21	ushin 22-S Bange 28	-E , NMPM,	Eddy	
Une of Dection 21 Township 2223 Range 2021 , NMPM,					
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS				ind some of this form is to be write	
	Name of Authorized Transporter of Oil	Cr Condensate XX	Andress (Give address to which approv		
	The Permian Corpor		Post Office Box 1183, Address (Give address to which approx	red copy of this form is to be sent	
	El Paso Natural Ga		Post Office Box 1492,		
		Unit Sec. Twp. Ege.	Is gas actually connected?		
	If well produces oil or liquids, give location of tanks.	J 21 22-S 28-E	Yes	May 8, 1979	
	If this production is commingled with	h that from any other lease or pool, p	give commingling order number:		
IV.	COMPLETION DATA		New Well Workover Deepen	Plug Back Same Lesster Still	
	Designate Type of Completio	Oil lieil			
	Dete Spudded	Date Compl. Ready to Frod.	Total Depth	P.B.T.D.	
	Conte Spunned				
	Elevitions (DE, RKB, RT, GR, etc.,	Name of Freducing Formation	lej (1)/Gas Pay	Tuking Teyth	
	1			Depth Casing Shoe	
	Perforations				
TUBING, CASING, A			CEMENTING RECORD		
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
			· · · · · · · · · · · · · · · · · · ·	t- ted	
				- Por 3 Str	
			·		
			fter recovery of total volume of load oil	and must be equal to or exceed to;	
v	. TEST DATA AND REQUEST FO	OR ALLOWABLE (Test must be a, able for this de	pth or be for full 24 hours)		
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas l	ift, etc.)	
			Casing Pressure	Choke Size	
	Length of Test	Tubing Pressure			
	Actual Frod. During Test	Oil-Bbla.	Water-Bbls.	Gas-MCF	
	Aerual Plou. Daring 1001				
	GAS WELL	It with all there	Bbls. Condensate/MMCF	Gravity of Condensate	
	Actual Frod. Test-MCF/D	Length of Test			
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
V	I. CERTIFICATE OF COMPLIANCE			ATION COMMISSION	
• ·	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.		APPROVED MAR 24 19		
			APPROVED	Incase T	
			01	<u>pase</u>	
			TITLE SUPERAS	יר איז	
			This form is to be filed in	compliance with RULE 1104.	
			This form is to be filed in compliance with RULE 1164. If this is a request for allowable for a newly drilled or deeper well, this form must be accompanied by a tabulation of the devia- tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for al- able on new and recompleted wells. Fill out only Sections I, II. III, and VI for changes of the		
	March 3, 1980 (Date)		Fill out only Sections 1, 11, 111, and the such change of condu- well name or number, or transporter, or other such change of condu-		

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(Date)

able on new and recompleted wells. Fill out only Sections I, II, III, and VI for changes of the well name or number, or transporter, or other such change of condu-Secarate Forms C-104 must be filed for each pool in mul-