

NEW MEXICO OIL CONSERVATION COMMISSION
 REQUEST FOR ALLOWABLE
 AND
 AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form O-104
 Supersedes Oils O-104 and O-110
 Effective 1-1-65

SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

Operator **ROBERTS & HAMMACK, INC.**

Address **756 Mercantile Dallas Bldg., Dallas, Texas 75201**

Reason(s) for filing (Check proper box) Other (Please explain)

New Well Change in Transporter of: Oil Dry Gas **Change in Operator**

Recompletion Casinghead Gas Condensate

Change in Ownership

If change of ownership give name and address of previous owner **operator**
Natural Energies, Inc. P. O. Box 6022, Dallas, Texas 75200

DESCRIPTION OF WELL AND LEASE

Lease Name Champlin-State	Well No. 1	Pool Name, including Formation North Bagley-Pennsylvania	Kind of Lease State, Federal or Fee State	Lease No. K-2311
Location Unit Letter P ; 660 Feet From The South Line and 660 Feet From The East				
Line of Section 8 Township 11-S Range 33-E , NMPM, Lea County				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Amoco Production Co.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 591, Tulsa, Oklahoma 74102
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Warren Petroleum Corp.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1569, Tulsa, Oklahoma 74102
If well produces oil or liquids, give location of tanks. Unit P Sec. 8 Twp. 11S Rge. 33E	is gas actually connected? Yes When 1968

If this production is commingled with that from any other lease or pool, give commingling order number: _____

VI. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Rest'v.	Diff. Rest'v.
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth		
Perforations						Depth Casing Shoe		
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE		CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT		

VII. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

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

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (Start-End)	Casing Pressure (Start-End)	Choke Size

VIII. 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.

ROBERTS & HAMMACK, INC.

(Signature)

 President

 (Title)
 September 14, 1972

 (Date)

OIL CONSERVATION COMMISSION

APPROVED DEC 14 1972, 19____

BY Joe D. Ramey
 Dist. I, Supv.

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.

RECEIVED

SEP 19 1952

OIL CONSERVATION COMM.
WASH. D. C.