	No. of COPIES RECEIVED I		The same was as the same of th		
	DISTRIBUTION	NEW MEXICO OF A	CONSERVATION CO. SION	_	
,	SANTA FE	I .	CONSERVATION CO. SION FOR ALLOWABLE	Form C-104 Supersedes Old C-104 and C-11	
	FILE	<u>·</u>	AND	Effective 1-1-65	
	U.S.G.S.	AUTHORIZATION TO TR	ANSPORT OIL AND NATURA	AL GAS	
	TRANSPORTER OIL /	- - -		RECEIVED	
	OPERATOR 4				
I.	PRORATION OFFICE	<u> </u>		JAN 171988	
٠.	Mark Production Co	mnany			
	Address	II. P. C. II.		ARTEGIA, OFFICE	
	3340 Republic Bank	3340 Republic Bank Building, Dallas, Texas 75201  Reason(s) for filing (Check proper box)  Other (Please			
	New Well	Change in Transporter of:	Other (Please explain) Change in na	me of Operator only from	
•	Recompletion .	Oil Dry G		rilling Company, effective	
·	Change in Ownership Casinghead Gas Condensate January 1, 1968				
	If change of ownership give name and address of previous owner Change in operating name only (same ownership).				
II.	II. DESCRIPTION OF WELL AND LEASE				
	Lease Name	Well No. Pool Name, Including F		, Laure IV	
•	Angell-State	3   East Millma	in Seven Rivers State, Fo	State E-7815	
	Unit Letter T. 5.; 1,650 Feet From The E Line and 1,650 Feet From The S				
	Line of Section 21 To	wnship 19S Range	28E , NMPM,	Eddy County	
III.	DESIGNATION OF TRANSPOR				
	Name of Authorized Transporter of Other Permian Corpor	<del>-</del> · ·		pproved copy of this form is to be sent)	
	Name of Authorized Transporter of Ca		P. O. Box 3119, Address (Give address to which a	pproved copy of this form is to be sent)	
	Phillips Petroleum (	Company	Bartlesville, Okl		
	If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected?	When	
	give location of tanks.	[IJ   21   19   28	Yes	March, 1962	
īv.	f this production is commingled with that from any other lease or pool, give commingling order number:				
	Designate Type of Completic	Oil Well Gas Well	New Well Workover Deeper	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, GR, etc.;	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
	Perforations	1		Depth Casing Shoe	
	•				
		TUBING, CASING, AN	CEMENTING RECORD		
	HOLE,SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
		<u> </u>	<u> </u>	<del> </del>	
V.	TEST DATA AND REQUEST F	EST 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 able for this depth or be for full 24 hours)			
	Date First New Oil Run To Tanks	1.12.17			
	Length of Test	Tubing Pressure	Cosing Pressure	Choke Size	
	Actual Prod. During Test	Oil-Bbis.	Water - Bbls.	Gds-MCF	
		·			
	GAS WELL		•	••	
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
	Lasting Mained (piece, pack proj	, aming a consider of the constant	County 1 tonama ( Butte-In )		
VI.	CERTIFICATE OF COMPLIANCE	CE .	OIL CONSER	RVATION COMMISSION	
			APPROVED FR 19		
	I hereby certify that the rules and r Commission have been complied v	egulations of the Oil Conservation with and that the information given	APPROVED -: 11 1.1	, 19	
	Commission nave been commission v	hart of my knowledge and belief	11 - 1 /1 /1 1900	100 70	

Nell M. Heflin, Assistant Secretary

January 10, 1968

(Date)

(Title)

OIL AND GAS INSPECTOR 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.