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O. C. D.
ARTESIA, OFFICEREQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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SANTA FE	1
FILE	1
U.S.D.S.	
LAND OFFICE	
TRANSPORTER	OIL 1 GAS 1
OPERATOR	1
REGISTRATION OFFICE	
UPHOLD	

Plains Radio Broadcasting Company /

Address
P. O. Box 9354 Amarillo, Texas 79105

Reason(s) for filing (Check proper box)	designation	Other (Please explain)
New Well <input type="checkbox"/>	Change in Transporter of:	
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/>	Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input checked="" type="checkbox"/>	Condensate <input type="checkbox"/>

If change of ownership give name
and address of previous owner

I. DESCRIPTION OF WELL AND LEASE

Lease Name L. E. Ranch 9	Well No. 1	Pool Name, including Formation E. Chisum (San Andres)	Kind of Lease State, Federal or Fee Fee	Lease No.
Location Unit Letter 0 : 660 Feet From The South Line and 1980 Feet From The East Line of Section 9 Township 11S Range 28E, NMPM, Chaves County				

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> The Permian Corp. Permian (EH. 9 / 1 / 87)	Address (Give address to which approved copy of this form is to be sent) Houston, Texas					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Mapco Production Co.	Address (Give address to which approved copy of this form is to be sent) 1800 S. Baltimore Ave. Tulsa, OK 74119					
If well produces oil or liquids, give location of tanks.	Unit 0	Sec. 9	Twp. 11S	Rge. 28E	Is gas actually connected? Yes	When 8-13-81

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

III. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'ty. <input type="checkbox"/>	Diff. R. <input type="checkbox"/>
Date Spudded May 25, 1969	Date Compl. Ready to Prod. June 9, 1969		Total Depth 2300'		P.B.T.D. 2258'			
Elevations (DF, RKB, RT, GR, etc.) 3700 GR	Name of Producing Formation San Andres		Top Oil/Gas Pay 2155		Tubing Depth 2150'			
Perforations single shots 2155', 2171', 2174', 2180', 2182', 2187', 2191', 2196'					Depth Casing Shoe 2288'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
16"	13-3/8"		113'		Cement Circulated			
12"	8-5/8"		1596'		Cement Circ.			
7-7/8"	4-1/2"		2288'		150 sacks			
	2-3/8" tubing		2150'					

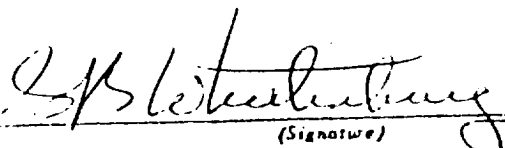
IV. TEST DATA AND REQUEST FOR ALLOWABLE
OIL WELL(Test must be after recovery of total volume of load oil and must be equal to or exceed top
able for this depth or be for full 24 hours)

Date First New Oil Run To Tanks June 14, 1969	Date of Test June 20, 1969	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hrs.	Tubing Pressure -0-	Casing Pressure -0-	Choke Size none
Actual Prod. During Test 35	Oil-Bbls. 35	Water-Bbls. -0-	Gas-MCF 10.5

GAS WELL

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

V. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation
Division have been complied with and that the information given
above is true and complete to the best of my knowledge and belief.

President

September 25, 1981

(Date)

OIL CONSERVATION DIVISION

APPROVED OCT 28 1981
BY W. A. Gussert
TITLE SUPERVISOR, DISTRICT II

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 device tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for all wells on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of well name or number, or transporter, or other such change of conditions.

Separate Forms C-104 must be filed for each pool in multi-completed wells.