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	SANTA FE	NEW MEXICO OIL CONSER								Form C-104		
	FILE	[/ _ 			REQUEST	FOR ALL	OWABLE		9	Supersedes Effective 1	Old C-104 and C-	
	U.S.G.S.	/				AND				rifective l	-1-65	
	LAND OFFICE		AUTHO	DRIZATIO	ON TO TR	ANSPORT	OIL AND	NATURAL				
	OIL	7	,	Cha	ange of	operato r			•	أم شاعده د		
	TRANSPORTER GAS				fro	m						
		 		D	r. Sam O	. Dunn						
	OPERATOR				to						16.67	
I.	PRORATION OFFICE Sam G. Dunn Oil Operations											
	Dr. Sam G. Dunn Box 3095											
	L			Lubb	ock, Ter	xas 794.	10				uta 	
	1312 Main, Lubbock, Texas FEB 1 6 1968											
	Reason(s) for filing (Check proper box) Other (Please explain)											
	New Well									70.		
	Recompletion		Oil	X	Dry G	as						
	Change in Ownership		Casinghed	ad Gas	Conde	nsate	EFF	ECTIVE M	ARCH 1,	1967		
II.	DESCRIPTION OF WEL	L AND LEA		Dool Name	, Including F	·		Trial of Land				
	Federal		1 _ 1		-			Kind of Leas		_	Lease No.	
			1	Line	la San A	nores		State, Federa	ol or Fee F e	deral	LC068127	
	Location Unit Letter N	, 990	_ Feet From	m The	S Lin	ne and	2310	Feet From	The	W		
	Line of Section 33	Township	, 6 S		Range	26 E	, NMPM	,	Chaves	5	County	
II.	DESIGNATION OF TRAI	NSPORTER	OF OIL	AND NA'	TURAL GA	ıs						
	Name of Authorized Transporter of Oil 📉 💮 or Condensate 🗌					Address (Give address to which approved copy of this form is to be sent)						
	THE PERMIAN CORPORATION					P. O. BOX 3119, MIDLAND, TEXAS 79701						
	Name of Authorized Transporter of Casinghead Gas or Dry Gas					Address (Give address to which approved copy of this form is to be sent)						
	If well produces oil or liquids, Unit Sec. Twp. Rge.					Is gas actually connected? When						
	give location of tanks.	N	3	<u> </u>	6 25			·				
IV.	If this production is commin COMPLETION DATA	ngled with the			ase or pool,	give commin	ngling order	number:				
	Designate Type of Co	mpletion -		ll Well	Gas Well	New Well	Workover	Deepen	Plug Bac	k Same F	Resty. Diff. Resty	
	Date Spudded	Date	Compl. Re	eady to Pro	L.	Total Depth	. L		P.B.T.D.			

V. TEST DATA AND REQUEST FOR ALLOWABLE
OIL WELL

Date First New Oil Run To Tanks

Date of Test

Producing Method (Flow, pump, gas lift, etc.)

TUBING, CASING, AND CEMENTING RECORD

Top Oil/Gas Pay

DEPTH SET

Name of Producing Formation

CASING & TUBING SIZE

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 (shut-in)

Casing Pressure (shut-in)

Choke Size

VI. CERTIFICATE OF COMPLIANCE

Elevations (DF, RKB, RT, GR, etc.)

HOLE SIZE

Perforations

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.

	Luch
· · ·	(Signature)
	(Title)
	2 -17-67 (Date)

OIL CONSERVATION COMMISSION

Tubing Depth

Depth Casing Shoe

SACKS CEMENT

BY W. a. Bressett

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.