	ANTA FE	/ la   l	CONSERVATION COMMISSION T FOR ALLOWA E AND	Form C-104 Supersedes Old C-104 and C Effective 1-1-65
	.S.G.S.	AUTHORIZATION TO TE	RANSPORT OIL AND NATURAL	
	TRANSPORTER OIL GAS			RECEIVED
	OPERATOR V		•	
1.	PRORATION OFFICE Operator	<u> </u>		.MN 21 mm
	Mountain States Petroleum Corp.			
Address O. C. D.			©. C. D.	
	P 0 Box 1936 Roswell, N M 88201 Reason(s) for filing (Check proper box)		ARTESM. OFFICE:	
	Kedson(s) for filing ((, Neck prope	r box)  Change in Transporter of:	Other (Please explain)	
	Recompletion	Oil Dry C	Gas [	±**
	Change in Ownership	Casinghead Gas Cond	ensate 🗍	1
	If change of ownership give na and address of previous owner		Box 2035 Roswell, N	M 88201
II.	DESCRIPTION OF WELL AND LEASE   Lease Name   Well No.; Pool Name, Including Formation   Kind of Lease			
	Statedayd S		· ·	Lease No.
	Location		100	State E 301
	Unit Letter G ;	2310 Feet From The North L	ine and2310Feet From	The Fact
	Line of Section 5	Township 8 So. Range	27 E , NMPM, Cha	Ves. County
III.	DESIGNATION OF TRANSP	ORTER OF OIL AND NATURAL G	AS Address (Give address to which appro	oved copy of this form is to be sent)
	WELL SI			
	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, give location of tanks.	Unit Sec. Twp. P.ge.	Is gas actually connected?	sen (1.16 )
	If this production is commingle	i with that from any other lease or pool,	give commingling order number:	n derekter i regietan die
ı٧.	COMPLETION DATA		<del></del>	
	Designate Type of Compl		New Well Workover Deepen	Plug Back   Same Resty, Diff. Resty
	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 Park Park
	Perforations			Depth Casing Shoe
	· · · · · · · · · · · · · · · · · · ·	<del></del>	D CEMENTING RECORD HT ING RE	
ŀ	HOLE SIZE	CASING & TUBING SIZE	THE HELL PROPERTY OF PER	TANT SACKS CEMENT SATIST
ŀ				
Ĺ			<u> </u>	
	TEST DATA AND REQUEST OIL WELL	FOR ALLOWABLE (Test must be a able for this di	ifter recovery of total volume of load oil epth or be for full 24 hours)	and must be equal to or exceed top allou
Ī	Date First New Oil Run To Tanks		Producing Method (Flow, pump, gas li	fi, etc.)
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size
ľ	Actual Prod. During Test	Oil-Bble.	Water-Bbis.	Gas - MCF
	GAS WELL			
ſ	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
L				
	Teeting Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
1. C	CERTIFICATE OF COMPLIANCE			TION COMMISSION
•	harahy castifu that the miles of	nd regulations of the Oil Consequenting	APPROVEDJAN	2 1 1988
I hereby certify that the rules and regulations of the Oli Conservation Commission have been complied with and that the information given			Original Signed By	
•	bove is true and complete to	the best of my knowledge and belief.	Mike Williams	
			TITLE Oil & Ga	s Inspector

Clerk

Sept. 1, 1986

(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 allow able 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.