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U.S.G.S.		1		
LAND OFFICE				
	OIL			
TRANSPORTER	GAS			
PRORATION OFFICE		7		
OPERATOR		1		

### NEW MEXICO OIL CONSERVA (Form C-104) Santa Fe, New Mexico

REQUEST FOR (OIL) - (GRAS) CALLOW APLE

JAN 2 © 1363

New Well Recompletion

This form shall be submitted by the operator before an initial allowable will be assigned to any completed Oil or Gas well. Form C-104 is to be submitted in QUADRUPLICATE to the same District Office to which Form C-101 was sent. The allowable will be assigned effective 7:00 A.M. on date of completion or recompletion, provided this form is filed during calendar month of completion or recompletion. The completion date shall be that date in the case of an oil well when new oil is delivered into the stock tanks. Gai must be reported on 15.025 psia at 60° Fahrenheit.

(C. 	ompany or Oj Sec etter	24	USA-Fitzgerald NHO40750A, Well No. 4 , in SE 1/4 NE 1/4, (Lease) T. 15-S , R. 28-E , NMPM., Undesignated Level Pool
			Elevation 3936 (DF) Total Depth 3138 PBID 3110
Plez	se indicate	location:	Top Oil/Gas Pay 2854 Name of Prod. Form. Sam Andres
D	C B	A	PRODUCING INTERVAL - 3094-96 Perforations 2877, 2935, 2953, 2956, 2997, 3006-08, 3057, 3082-84, 3088-90,
E	FG	H X	Open HoleCasing Shoe_3137Tubing_2898
L	K J	I	OIL WELL TEST - Choke Natural Prod. Test:bbls.oil,bbls water inhrs,min. Size Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of
M	N O	P	load oil used): <u>20</u> bbls.oil, <u>16</u> bbls water in <u>24</u> hrs, <u>0</u> min. Size <u>13-4</u> 8"Si <u>GAS WELL TEST</u> -
	FRIL & 660 (FOUTAGE) Asing and Con Feet 330		Natural Prod. Test: MCF/Day; Hours flowedChoke Size [/ rd Method of Testing (pitot, back pressure, etc.): [/ Test After Acid or Fracture Treatment: MCF/Day; Hours flowed [/ Choke SizeMethod of Testing:
5-1/2	31.37	200	Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): 1000 gals. acid. 1700 BO 90.000% sand
2-3 <b>/8</b>	2898		Casing Tubing Date first new Press. 0 Press. 0 oil run to tanks January 19. 1963
			Oil Transporter The Permian Corporation
emarks:	#By its	Managing	Gas Transporter None Agent Tenneco G11 Company
I her	eby certify <sub>n</sub> t	hat the infe	ormation given above is true and complete to the best of my knowledge.
pproved.	، به مین . 		ormation given above is true and complete to the best of my knowledge.

Address Box 307, Hobbs, New Mexico

USA-Fitzgerald MMO40750-A No.4 Unit H, Section 24, T-15-S, R-28-E Chaves County, New Mexico

#### DEVIATION SURVEYS

Depth	Degrees of Deviation
102	1/4
225	1/2
300	1
<b>90</b> 0	1
1528	3/4
2047 2542	1
2542	1 1/2
2823	1/2
3138	1/2

#### AFFIDAVIT

State of New Mexico

County of Lea

Before me on this day personally appeared A. W. Lang, known to me to be the person whose name is subscribed to this instrument, who after being duly sworn on Oath states that he represents Tenneco Oil Company in the capacity of District Production Superintendent and that said report of Deviation Surveys contains no misstatements or inaccuracies and that no pertinent matter has been omitted, and that affiant is duly authorized to make this affidavit.

TENNECO OIL COMPANY

air Lang

Sworn to and subscribed before me this 25th day of January, 1963.

Freelly M. Barwhing Notary Public in and for Les County, New Mexico.

My Commission Expires February 13, 1966.

ા માર્ગ**દે**ક સર્જાદાર દોર્ગમાં વિજે માટે કરે છે. ગાહેલ દે, પ્રજીતિસ શિંદુ દીમદેઉમાર, દેમ ગિયાસ અભિક્ષેજી, મોલ્ટ સગદેશ

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NUMBER OF COPIES RECEIVED DISTAIBUTION SANTA FF // FILE // U.S.C.S.	5			SANT	CONSERVA	MEXICO	FORM C-110 (Rev. 7-60)
LAND OFFICE TRANSPORTER GAS PROBATION OFFICE OPERATOR 24		T	O TRAN	NSPOR	T OIL AND	E AND AUTHORIZA D NATURAL GAS	
Company or Operator		Corporation 011 Company				Lease USA-Fitzgerald NMK	Well No.
Unit Letter H	Section 24	Township 15-S		Range 2	8-е	County Chaves	
Pool	designat	Λ	& Ja	nk Se	n.	Kind of Lease (State, Fed, Federal	Fee)
	ices oil or con location of tar		Unit Let	ter M	Section 1	_	Range <b>29-E</b>
Authorized transporter of	of oil 🕱 or	condensate []			Address (give	address to which approved cop	y of this form is to be sent)
The	Permian	Corporation			Box 41	57, Midland, Texas	
		Is Gas A	Actually (	Connecte	d? Yes	NoX	
Authorized transporter of	of casing head	l gas 🔄 or dry ga	s Date nect	e Con- ted	Address (give	address to which approved cop	y of this form is to be sent)
	None						
	New Well . Change in ? Oil	REAS	ON(S) FOF  ne) y Gas	R FILING	(please check	proper box) R mership 1 below)	JAN 2 8 1533 O. C. C. RTESIA, OFFICE
Remarks The undersigned cer	tifies that th	e Rules and Regu	lations of 1	the Oil Co	onservation Co	mmission have been compli	ed with.
		ed this the25t				. 19 <b>63</b> .	
		ATION COMMISSIO	- <del>1</del>		By		······································
Approved by	" Arii	string				V Lang	A. W. Long Intendent
Title	<b>611.</b> 4 8	o da neserte	Ĉ.			0il Company	
Date	JAN	1 2 0 1963			Address Box 307	Hobbs, New Mexic	0