BL.	NO. OF COPIES AFCEIVED DISTRIBUTION SANTA FE FILE U.S.G.S. LAND OFFICE I RANSPORTER OIL I RANSPORTER OIL GAS OPERATOR PRORATION OFFICE Operator VEGA PETROLEUM CO Address P. O. BOX 2383 Reason(s) for filing 'Check proper box) New We!1 Recompletion Change in Ownership X	MIDLAND, TEXAS 7	OR ALL AND NSPORT 9701	OWABLE OIL AND NA Other (Please ex) Correction	plain) n of Ori	Form C-104 Supersedes Old C-104 and C-110 Effoctive 1-1-65 AS ginal Transfer y 1, 1976	
	If change of ownership give name and address of previous ownerM	urphy Minerals Corporati	on, P.	0. Drawer	2164, R	oswell, New Mexico 88201	
11.	DESCRIPTION OF WELL AND I Lease NameTract #3 No Caprock Queen Unit # Location Unit Latter P ; 660 Line of Section 31 Tow	Well No. Pool Name, Including Fo	Lea)	Ste	Feet From Th	c: Fee State B 9676	
ш.	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA	s			d copy of this form is to be sent)	
	NAVAJO REFINING COMPAN		O. Freeman Ave., Artesia, New Mexico 88210 Address (Give address to which approved copy of this form is to be sent)				
	It well produces oil or liquids, Unit Sec. Twp. Rge. Is gas actually connected? When give location of tanks. A 6 13S 32E No						
	If this production is commingled with that from any other lease or pool, give commingling order number: <u>COMPLETION DATA</u> OII Well Gas Well New Well Workover Deepen Plug Back Same Resty, Diff. Resty,						
	Designate Type of Completio		Total De	t i i 1	1 	P.B.T.D.	
	Date Spudded	Name of Producing Formation		·		Tubing Depth	
			Top Oil/Gas Pay			Depth Casing Shoe	
	HOLE SIZE	TUBING, CASING, AND CASING & TUBING SIZE	CEMEN	DEPTH SET		SACKS CEMENT	
			(of load oil a	nd must be equal to or exceed top allow-	
۷.	W. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of loa able for this depth or be for full 24 hours) Date First New Oil Run To Tanks Date of Test Producing Method (Flow, pump, 6)						
	Length of Test	Tubing Pressure	Casing F	ressure		Choke Size	
	Actual Prod. During Test	Oil-Bbla.	Water - Bl	bl s.		Gas-MCF	
	GAS WELL Actual Prod. Test-MCF/D	Length of Teat	Bbis. Co	ndensate/MMCF	<u></u>	Gravity of Condensate	
	Teating Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing F	Pressure (Shut-1)	n)	Choke Size	
¥1.	CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION				
	I hereby certify that the rules and regulations of the Oil Conservation		APPR	APPROVED, 19			
	Commission have been complied with and that the information giv above is true and complete to the best of my knowledge and beli			BY			
			TITLE Dury 2, Supv.				
	Hong ? lehund		If	This form is to be filed in compliance with AULE 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			
	July 30, 1976 ^(Title)			 well, this form must be accompanied by a tabulation of the contained 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 Sectiona 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 filled for each pool in multiply completed wells. 			

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