	DISTRIBUTION SANTA FE		CONSERVATION COMMISS N T FOR ALLOWABLE	Poim C-104 Superseder Old C-104 and C-13
	U.S.G.S.	AUTHORIZATION TO TR	AND RANSPORT OIL AND NATURAL	Ellective 1-1-65
	LAND OFFICE		AND NATURAL	GAS
	TRANSPORTER GAS			
	OPERATOR			
1.	PRORATION OFFICE Operator	1		
	MURPHY MINERALS CORPORATION			
	P.O. Drawer 2164 Roswell, New Mexico 88201			
	Reason(s) for filing (Check proper bo New Well	r) Change in Transporter of:	Other (Please explain)	
	Recompletion	Oil Dry C	Gas	
[Change in Ownership X	Casinghead Gas Cond	ensule Change is effect	tive February 1, 1976
	If change of ownership give name and address of previous owner	VEGA PETROLEUM CORPO	RATION, P.O. Box 2383,	Midland, Texas 79701
11 .]	DESCRIPTION OF WELL AND Lease Name Enact #12	LEASE Well No.; Pool Name, Including	Formation Kind of Leas	
	Lease Name Tract #12 No Caprock Queen Unit		Queen (Lea) State, Federa	Leuse
L .	Location		•	
	Unit Letter M ; 66	0 Feet From The SouthLi	ine and <u>660</u> Feet From	TheWest
	Line of Section 32 To	wnship 12S Range	<u> 32Е , ммрм, Lea</u>	County
и. 1 Г	DESIGNATION OF TRANSPOR Name of Authorized Transporter of OL	TER OF OIL AND NATURAL G.	AS Address (Give address to which appro	und copy of this form is to be easily
l	NAVAJO REFINING C			esia, New Mexico 88210
ſ	Name of Authorized Transporter of Ca	singhead Gas 📋 or Dry Gas 🗍	Address (Give address to which appro-	ved copy of this form is to be sent)
-	If well produces oil or liquide,	Unit Sec. Twp. Rge.	Is gas actually connected? Who	en
	give location of tanks.	A 6 135 32E	No	
	f this production is commingled wi COMPLETION DATA	th that from any other lease or pool, Oil Well Gas Well		
	Designate Type of Completion		New Well Workover Deepen	Plug Back Same Fies'v. Diif. Res'v.
	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
	Perforations Depth Casing Shoe			Depth Casing Shoe
F	HOLESIZE	TUBING, CASING, AN	D CEMENTING RECORD	SACKS CEMENT
				SACKS CLIMENT
┢				
	EST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed sap.al able for this depth or be for full 24 hours)			
1	Date First New Oil Run To Tanks	Date of Test	Preducing Method (Flow, pump, gas life	t, etc.)
	_ength of Test	Tubing Pressure	Casing Pressure	Choke Size
7	Actual Prod. During Tool	Oil-Bbla.	Water - Bols.	Gas-MCF
۱		<u>I</u>	1	<u> </u>
_	AS WELL. Actual Frod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condenacte
	Feating Mothod (pilot, back pr.)	Tubing Prossure (Shuu-lu)	Casing Preasure (Shut-in)	Chake Size
	ERTIFICATE OF COMPLIANC	510		
	LITH PORTE OF COMPLEXAC			TION COMMISSION
I hereby cortify 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.			APPROVED Urig. Signed in 19	
	who complete to the	A Nortouko and benet.	Dist I. Super TITLE This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly diffic tor deepened	
	Λ	1/1-1-1		
	Wonald &	o Rylon		
(Signature) '/ Agent (Title)			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.	
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