

DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

Operator Vega Petroleum Corporation	
Address P. O. Box 2383, Midland, Texas 79701	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Change is effective <u>May 1, 1975</u>	

If change of ownership give name and address of previous owner Thunderbird Oil Corporation, P. O. Box 1778, Midland, Texas 79701

DESCRIPTION OF WELL AND LEASE			
Lease Name Tract #6 No. Caprock Queen Unit #1	Well No. 14 Caprock Queen (Lea)	Kind of Lease State, Federal or Fee State	Lease No.
Location			
Unit Letter N	: 660 Feet From The South	Line and 1980	Feet From The West
Line of Section 32	Township 12-S	Range 32-E	NMPM, Lea County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS						
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Navaho Refining Company	No. Freeman Ave., Artesia, New Mexico 88210					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	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 A	Sec. 6	Twp. 13-S	Rge. 32-E	Is gas actually connected? No	When

If this production is commingled with that from any other lease or pool, give commingling order number: \_\_\_\_\_

COMPLETION DATA								
Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded	Date Compl. Ready to Prod.	Total Depth		P.B.T.D.				
Elevations (DF, RAB, RT, CR, etc.)	Name of Producing Formation	Top Oil/Gas Pay		Tubing Depth				
Perforations		Depth Casing Shoe						
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			

TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL		(Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)	
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

CERTIFICATE OF COMPLIANCE	
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.	
<u>Sheldon Aaron</u> (Signature)	
President, Vega Petroleum Corporation	
(Title)	
March 26, 1975	
(Date)	

OIL CONSERVATION COMMISSION	
APPROVED <u>APR 30</u> , 19 <u>75</u>	
BY <u>Joe E. ...</u>	
TITLE <u>Director</u>	
This form is to be filed in compliance with RULE 1104.	
If this is a request for allowable for a newly drilled or deepen well, this form must be accompanied by a tabulation of the deviat tests taken on the well in accordance with RULE 111.	
All sections of this form must be filled out completely for allo able on new and recompleted wells.	
Fill out only Sections I, II, III, and VI for changes of own' well name or number, or transporter, or other such change of condit'	
Separate Forms C-104 must be filed for each pool in mu' completed wells.	