		NSERVATION COMMISSION	Form C-104 Supersedes Old C-104 and C-110
SANTA FE	REQUEST F	CR ALLOWABLE	Effective 1-1-65
U.S.G.S.	AUTHORIZATION TO TRAN		AL GAS
LAND OFFICE			
TRANSPORTER OIL GAS			
OPERATOR			
PRORATION OFFICE			
Operator			
Vega Petroleum Cor Address P. O. Box 2383, Mi		- <u> </u>	
P. U. BOX 2363, MI Reason(s) for filing (Check proper box)	Idialid, Iexas 19701	Other (Please explain)	
New Well	Change in Transporter of:		
Recompletion Change in Ownership X	Oil Dry Gas Casinghead Gas Condens		fective April 1, 1975
If change of ownership give name and address of previous owner	Thunderbird Oil Corpor	ation, P. O. Box 17	78, Midland, Texas 79701
DESCRIPTION OF WELL AND L	EASE	rmation Kind of	
Lease Name Tract #6	Well No. Pool Name, Including Fo	Charles F	
No. Caprock Queen Unit			
Unit Letter N ; 660	<u> </u>	and <u>1980</u> Feet 2	From The <u>West</u>
Line of Section 32 Tow	mship <u>12-S</u> Range	32-Е , ММРМ,	Lea County
DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA	s (Ca) -	<u> 11 11 11 11 11 11 11 11 11 11 11 11 11</u>
Name of Authorized Transporter of Cil	X or Condensate	Address (Give address to which	approved copy of this form is to be sent)
Navaho Refining Company Name of Authorized Transporter of Cas	Y inghead Gas or Dry Gas	No. Freeman Ave	approved copy of this form is to be sent)
If well produces oil or liquids,	Unit Sec. Twp. P.ge.	is gas actually connected?	When
give location of tanks. If this production is commingled wit	A 6 13-S 32-E	NO give commingling order number	
COMPLETION DATA			
Sesignate Type of Completio	on - (X)	New Well Workover Deep	
Date Spudod	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 Dectin Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD			
	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
HOLE SIZE	CASIN & LODING SIZE		
		1	
TEST DATA AND REQUEST FO	able fo sch ie de	pth or 🐎 (or full 24 hours)	ad oil and must be equal to or exceed top allow-
TEST DATA AND REQUEST FO	OR ALLOWABLE (Test must be a) able for this de	fter covery of total volume of lon pth or D (or full 24 hours) Producing Mained (Flow, pump,	
TEST DATA AND REQUEST FO	able fo sch ie de	pth or 🐎 (or full 24 hours)	
TEST DATA AND REQUEST FO OIL WELL Date First New Oil Run To Tanks	able for this de	pth or 5 (or full 24 hours) Producing Mathod (Flow, pump,	gaz lift, etc.j
TEST DATA AND REQUEST FO OIL WELL Date First New Oil Run To Tanks Length of Test	able for this de Date of Test Tubing Pressee	pth or 5 (or full 24 hours) Producing Method (Flow, pump, Casing Pressure	gas lift, etc.) Choke Size
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