NO. OF COPIES RECE	EIVED	i	
DISTRIBUTIO			
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
		l –	

III.

L	NO. OF COPIES RECEIVED						
	DISTRIBUTION	NEW MEXICO OIL CO	ONSERVATION COMMISSION	Form C-104			
	SANTA FE		FOR ALLOWABLE	Supersedes Old C-104 and C-110			
ı	FILE	WE40E0.	AND AND	Effective 1-1-65			
ŀ	U.S.G.S.	ALITHODIZATION TO TOAL	NSPORT OIL AND NATURAL GA	\c			
ŀ	LAND OFFICE		MOP OR INDIC AND NATURAL GA	NO .			
ŀ	OIL	CTV 1-					
	TRANSPORTER						
-	GAS						
1	OPERATOR						
1.	PRORATION OFFICE						
	Tipperary Resource Address	ipperary Resources Corporation					
	500 West Illinois	Midland, Texas	79701				
	Reason(s) for filing (Check proper box)		Other (Please explain)				
	New Well	Change in Transporter of:	Change in Opera				
i	Recompletion	Oil Dry Gas	🖳 🖳 Stoltz & Compan	y, Inc., Midland.			
	Change in Ownership	Casinghead Gas Condens					
L							
	If change of ownership give name and address of previous owner						
	·	magn to the Build	- Proposition in				
н.,	DESCRIPTION OF WELL AND I	Well No. Pool Name, Including Fo	rmation Canican Kind of Lease	Lease No.			
l	Lease Name		R 3488 State, Federal	or Fee 17.7221			
	J. D. Guye	North Bagley	(Upper Penu)	State E-7332			
	Location						
	Unit Letter H; 198	Feet From The North Line	e and 660 Feet From Th	e <u>East</u>			
	Line of Section 22 Tow	mship 11-S Range	33-E , NMPM, I	County			
	DEGLOS ATTON OF TRANSPORT	TED OF OH AND NATURAL GAS	\$				
ш.		or Condensate	Address (Give address to which approve	d copy of this form is to be sent)			
	Name of Authorized Transporter of Oil	X		Tuckhoole Mouse			
Service Pipe Line Company Amoco Pipeline Name of Authorized Transporter of Casinghead Gas or Dry Gas			Address (Give address to which approved copy of this form is to be sent)				
	Warren Petroleum (Corporation	Box 1589, Tulsa, Ok	:lahoma			
		Unit Sec. Twp. Rge.	Is gas actually connected? When	-			
	If well produces oil or liquids,		-				
1	give location of tanks.	ינד יסס : וזכי זיד	Vac	-1-69			
	give location of tanks.	H 22 115 33E		1-69			
	If this production is commingled wit	h that from any other lease or pool,	give commingling order number:				
	If this production is commingled wit	h that from any other lease or pool, a		Plug Back Same Res'v. Diff. Res'v.			
	If this production is commingled wit	h that from any other lease or pool, a	give commingling order number:				
	If this production is commingled wit COMPLETION DATA Designate Type of Completion	h that from any other lease or pool, a	give commingling order number:				
	If this production is commingled wit	th that from any other lease or pool, on - (X)	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.			
	If this production is commingled wit COMPLETION DATA Designate Type of Completion Date Spudded	h that from any other lease or pool, and the from any other lease or p	New Well Workover Deepen Total Depth	Plug Back Same Res'v. Diff. Res'v.			
	If this production is commingled wit COMPLETION DATA Designate Type of Completion	th that from any other lease or pool, on - (X)	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v. P.B.T.D.			
	If this production is commingled wit COMPLETION DATA Designate Type of Completion Date Spudded	h that from any other lease or pool, and the from any other lease or p	New Well Workover Deepen Total Depth	Plug Back Same Res'v. Diff. Res'v.			
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	If this production is commingled wit COMPLETION DATA Designate Type of Completion Date Spudded Elevations (DF, RKB, RT, GR, etc.)	h that from any other lease or pool, on — (X) Oli Well Gas Well Date Compl. Ready to Prod. Name of Producing Formation	New Well Workover Deepen Total Depth Top Oil/Gas Pay	Plug Back Same Res'v. Diff. Res'v.			
	If this production is commingled wit COMPLETION DATA Designate Type of Completion Date Spudded Elevations (DF, RKB, RT, GR, etc.)	h that from any other lease or pool, on — (X) Oli Well Gas Well Date Compl. Ready to Prod. Name of Producing Formation	New Well Workover Deepen Total Depth Top Oil/Gas Pay	Plug Back Same Res'v. Diff. Res'v.			
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IV.	If this production is commingled with COMPLETION DATA Designate Type of Completion Date Spudded Elevations (DF, RKB, RT, GR, etc.) Perforations HOLE SIZE TEST DATA AND REQUEST FOOIL, WELL Date First New Oil Run To Tanks Length of Test Actual Prod. During Test	Date Compl. Ready to Prod. Name of Producing Formation TUBING, CASING, AND CASING & TUBING SIZE OR ALLOWABLE (Test must be a) able for this de	New Well Workover Deepen Total Depth Top Oil/Gas Pay CEMENTING RECORD DEPTH SET fter recovery of total volume of load oil a pth or be for full 24 hours) Producing Method (Flow, pump, gas lift Casing Pressure	Plug Back Same Res'v. Diff. Res'v. P.B.T.D. Tubing Depth Depth Casing Shoe SACKS CEMENT and must be equal to or exceed top allowers, etc.) Choke Size Gas-MCF			
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V.	If this production is commingled with COMPLETION DATA Designate Type of Completion Date Spudded Elevations (DF, RKB, RT, GR, etc.) Perforations HOLE SIZE TEST DATA AND REQUEST FOOL, WELL Date First New Oil Run To Tanks Length of Test Actual Prod. During Test GAS WELL Actual Prod. Test-MCF/D Testing Method (pitot, back pr.)	Date Compl. Ready to Prod. Name of Producing Formation TUBING, CASING, AND CASING & TUBING SIZE OR ALLOWABLE (Test must be a able for this de able for this de Complement of Tubing Pressure Coll-Bbls. Length of Test Tubing Pressure (Shut-in)	New Well Workover Deepen Total Depth Top Oil/Gas Pay CEMENTING RECORD DEPTH SET fter recovery of total volume of load oil a pth or be for full 24 hours) Producing Method (Flow, pump, gas lift Casing Pressure Water-Bbls. Bbls. Condensate/MMCF Casing Pressure (Shut-in)	Plug Back Same Res'v. Diff. Res'v. P.B.T.D. Tubing Depth Depth Casing Shoe SACKS CEMENT and must be equal to or exceed top allowed, etc.) Choke Size Gas-MCF Gravity of Condensate Choke Size			
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BY.

TITLE .

VI.

Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

TIPPERARY RESOURCE	CES CORP.		
n. R.W.	Keener		
BY; (Sig	(Signature)		

Vice President R. W. Keener,

September 25. 1968e)

This form is to be filed in compliance with RULE 1104.

leologist

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 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 Sections 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 filed for each pool in multiply completed wells.