NO. OF CORIES RECEIVED	-					
DISTRIBUTION						
SANTA FE		CONSERVATION COMMISSION	Form C-104 Supersedes Old C-104 and C-11			
FILE	REQUEST	FOR ALLOWABLE AND	Diffective 1-1-65			
U,S.G.S.	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS					
LAND OFFICE	AUTHORIZATION TO TRA	AND WATORAL G	A3			
TRANSPORTER GAS						
OPERATOR						
I. PRORATION OFFICE						
Operator						
Address	201 Wall Blog. Suite 308. Midland, Texas					
Reason(s) for filing (Check proper be						
New Well	Change in Aranguarter at:	Other (Please explain)				
Resom; Petron	11 - 12 - 12 - 12 - 12 - 12 - 12 - 12 -	16.1 L				
Thunge in Contersing	Parinder to Pas   In te	e.s itej				
If change of ownership give name and address of previous owner						
II. DESCRIPTION OF WELL ANI Leadse Name T P "A" State		th Bagley Lower Penn.	Kind of Lease   State   State			
Location Location	Z Not (	hi basiey nower leim.	State, Federal or Fee State			
	80 East	810	South			
Uni: Letter C ; 19	i ket Prob. Dec	no ali Peet Prom T	The			
Line of Section. 10	Ownship 118 Home	33E , MMHA,	Lea County			
III. DESIGNATION OF TRANSPO						
Name of Authorized Transporter of C Pan American Corp.		Aidress (Give address to which approx Box 1725 Midland, Texa				
	Casinaheal Gas 🗶 - criry Jas 🗀	Ablaess (Give address to which approx				
Warren	The state of the s	a state sa joint address in a men approx	ca copy of this fold is not selley			
	Thit Sec. Twy. Edge.	Is gas actually connected? Whe	en			
If well produces oil or liquids, give location of tanks.	J 10 11S 33E	Yes				
If this production is commingled y	with that from any other lease or pool,	aive comminating order number				
IV. COMPLETION DATA	vitil that from any other rease of poor,	grie comminging order number.				
Designate Type of Complet	x = x = x = x	New Well   Workever   Deeper.	Fing Back Same Bestv. Piff. Hestv.			
Date Spudded 1-27-67	Date Compl. Rendy to From 3-10-67	Total Teptl. 10221	P.B.T.D.			
North Bagley	Name of Freducing Fermation  Lower Penn.	Tep Pil/Ges Pay 10110	Tubing Depth 10084 Packer			
Perforations 10110-26, 10129, 101	.32-40, 10148-54		Depth Oasing Shoe 10221			
	TUBING, CASING, AND CEMENTING RECORD					
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT			
172	13 3/8	361	375 Circulated			
11	8 5/8	3740 10221 DV Tool 4549	300 750 and 300 Above DV			
7 7/8	5 <del>2</del> 2 3/8 EUE	10221 DV 1001 4549	750 and 300 Above DV			
V. TEST DATA AND REQUEST	FOR ALLOWABLE. Test must be a	after recovery of total volume of load oil depth or be for full 24 hours)	i			
OH. WELL Date First New Cil Bun To Tunks	Date of Test	Froducing Method (Flow, pump, gas lif	t, etc.)			
3-10-67	3-11-67	Flowing				

Date First New Cil Bun To Tanks	Date of Test	Froducing Method ( $Flow$ , $pump$	o, gas lift, etc.)	
3-10-67	3-11-67	Flowing		
i.ength of Test 24 Hr.	Tuking Pressure 540	Cusing Pressure Packer	Choke Size	
Actual Fred. During Test 410	Offi-Bbls. 242	Water-Fels. <b>168</b>	Gas-MCF 356	

GAS WELL						
Actual Prod. Test-MOD To	Length of Tost	Bbls. Condensate/MMCF	Gravity of Condensate			
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size			

## VI. 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.

District Superintendent

(Title)

3-13-67

(Date)

OIL CONSERVATION COMMISSION

APPROVED

This form is to be filed in compliance with RULE 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 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 Sections I, II, III, and VI only 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.