1	J. U. COPIES NECEIVED	I						
}	DISTRIBUTION SANTA FE	NEA	NY 2세 2세 442.0 10 Oct. (2 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 -				Form C-104 Supersedes Old C-104 and C-116	
-	FILE			n dag an an ing pangalan an ang pangalan an an Tanggaran		Effective 1-1-6		
-								
-	U.S.G.S.	AUTHORIZA		3 P. W. 12 S. 250	THE BAL GAS			
	LAND OFFICE							
	RANSPORTER GAS							
i	OPERATOR							
_ }	PRORATION OFFICE							
1.	Operator	0100010			a company desired to			
	CITIES SERVICE OIL C	OMPANY						
l	P.O. BOX 69, Hobbs,		240					
	Reason(s) for filing (Check proper box,	)			1.50 30.147			
į	New Well	Change in 1 (5)						
	Recompletion X	C+	<b>X</b>					
	Change in Ownership	Costo (berd or f						
	If change of ownership give name and address of previous owner							
	·	I FACT						
	DESCRIPTION OF WELL AND	Well No. 199			- euse		1.ease No	
	State AD	11 M	escalero Pe	rmo Penn	over 5 det., or	State	9943	
	Location			• • • •		<b>.</b>		
	Unit Letter 0 ; 30	Deet from 1	South	1930	i tora Mu <b>e</b> j	East		
	Line of Section 22 To	waship 10S		32E	Lea_		County	
111	DESIGNATION OF TRANSPOR	TER OF CUL AND						
	DESIGNATION OF TRANSPOR'	<b>X</b> The date of the				copy of this form is	to be sent)	
	The Permian Corporat			P.O. Box 3	119, Midland,	Texas		
	Name of Authorized Transporter of Ca	singhead Cas			ret rendered	copy of this form is	to be sent)	
	None							
		Unit Sec.			- 2.			
	If well produces oil or liquids, and longitudes, and longitudes.	0 22	10S 32E	No	Use	& vented		
		41 41 44 (1 4 1 4 1 4 1 4 1 4 1 4 1 4 1			t l'her,			
	If this production is commingled wi	th that from Any or o			No. / The same desire			
IV.	COMPLETION DATA					ig Back   Same Re	stv. Diff. Resiv.	
	Designate Type of Completic	on = (X)				+	!	
	Date Spudded	Date Con I have				b.T.D.		
	. Safe Spadded							
	Elevations (DF, RKB, RT, GR, etc.)	Name of Francisco				using Depth		
	Elevations (DF, RRB, RT, GR, etc.)							
	Perforations		•		10 m	epth Casing Shoe		
		7030	( april 1 to		a militar an executati			
	HOLE SIZE	CASING & T.				SACKS CE	MENT	
	<u> </u>				بالمودية ال			
	TOTAL AND DECUEST E	OD ALLOWARTS			in the stand	must be equal to or	exceed top allou	
V.	TEST DATA AND REQUEST FOIL WELL	OR ALLEMANNES	1.					
	Date First New Oil Run To Tanks	Date of Task			் இரு ஆடித்திர	tc.)		
	i							
	Length of Test	Tubing Freshur				hoke Size		
	1							
	Actual Prod. During Test	Oil - Bbls.	1 10 10 10 10 10 10 10 10 10 10 10 10 10		-	as - MCF		
	-		_		ا همانها شاران المهار الراب را			
	GAS WELL							
	Actual Prod. Test-MCF/D	Length of Test				Gravity of Condensat	•	
					re læ	hoke Size		
	Testing Method (pitot, back pr.)	Tubing Pressure ( 8)	8 1 · E i	-	11 42	JULE SIGN		

## VI. CERTIFICATE OF COMPLIANCE

Testing Method (pitot, back pr.)

I hereby certify that the rules and regulations of the  $\mathcal O$  Commission have been complied with and that the solutions above is true and complete to the best of my knowledge.

RVATION COMMISSION

series in sillowable for a newly drilled or deepened with ampanted by a tabulation of the deviation with its secondance with RULE 111.

if a firm must be filled out completely for allow-

d in compliance with RULE 1104.

in the assemble I, II, III, and VI for changes of owner,

war to 100 awas be filed for each pool in multiply

March 27, 1972

Dist. Admin. Supervisor

(Title) (Date)

(Signature)