HO. OF COPIES REC	EIVED	
DISTRIBUTION	NC	
SANTA FE		
FILE		
U.S.G.S. LAND OFFICE		Ι_
TRANSPORTER	OIL	
INANSPONIEN	GAS	
OPERATOR		
PRORATION OFFICE		Τ

	DISTRIBUTION SANTA FE FILE		ONSERVATION COMMIS FOR ALLOWABLE AND	SIC.	Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65
	U.S.G.S. LAND OFFICE TRANSPORTER GAS	AUTHORIZATION TO TRA		ATURAL GAS	
1.	OPERATOR PRORATION OFFICE Operator	en o ration			
	Reason(s) for filing (Check proper box)	g., Midland, Texas 79701	Other (Please o	xplain)	
	New We!l Recompletion Change in Ownership	Change in Transporter of: Oil X Dry Ga Casinghead Gas Conder	=		
	If change of ownership give name and address of previous owner				
II.	DESCRIPTION OF WELL AND I Lease Name Vada Lee Pruitt Batte Location	ry2 2 Vada (Penn)		(ind of Lease State, Federal or Fe	ree
	Unit Letter M; 660	Feet From The South Lir	ne and <u>660</u>	Feet From The	West
	Line of Section 17 Tow	mship 9-S Range	34-Е , ММРМ,	Lea	County
ш.	DESIGNATION OF TRANSPORT	or Condensate	Address (Give address to	which approved cop	by of this form is to be sent)
	Service Pipe Line Com	pany Pipeline Co.	i		ck Texas py of this form is to be sent)
	Warren Petroleum Corp If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. P.ge. C 20 9-S 34-E	P. O. Box 1589 Is gas actually connected Yes	When Oct.	ahoma 1, 1967
IV.	this production is commingled with that from any other lease or pool, give commingling order number: COMPLETION DATA Oil Well Gas Well New Well Workover Deepen Plug Back Same Resty. Diff. R				
	Designate Type of Completion	on – (X)	New Well Worksver	1	
	Date Spudded	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	Tub	ing Depth
	Perforations	1		Dep	th Casing Shoe
		TUBING, CASING, AN	D CEMENTING RECOR)	
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SE	т	SACKS CEMENT
v	. TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be able for this d	after recovery of total voluments or be for full 24 hours	ne of load oil and mi	ust be equal to or exceed top allow-
	OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow	, pump, gas lift, etc.	.)
	Length of Test	Tubing Pressure	Casing Pressure	Cho	ke Size
	Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas	-MCF
				·	
	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCI	Gra	vity of Condensate
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-	-in) Cho	oke Size
.	CERTIFICATE OF COURT IAN	CF	OIL	ONSERVATIO	N COMMISSION
VI	. CERTIFICATE OF COMPLIAN				, 19
	I hereby certify that the rules and	regulations of the Oil Conservation	APPROVED	17	/

VI.

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

Carolin Jurier
(Signature)
PRODUCTION CLERK
(Title)
NOVEMBED 22 1967

(Date)

BY. TITLE .

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 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.