NO. OF CORIES PECEIVED	<u>-</u>		
DISTRIBUTION SANTA FE		ONSERVATION COMMISSION FOR ALLOWABLE	Form C-104 Supersedes Old C-104 and C-110
FILE	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	AND	Effective 1-1-65
U.S.G.S.	AUTHORIZATION TO TRA	NSPORT OIL AND NATURAL G	
LAND OFFICE			14 37
TRANSPORTER			• •
OPERATOR			
PRORATION OFFICE			
Southland Royalty	Company		
1405 Wilco Bldg.,			
Reason(s) for filing (Check proper box		Other (Please explain)	
10-w Well	Themse in Transporter of:		
Recompletion	Oil Dry Ga	=	
('i, m.pe.inwnership	Insir rheda Gas Conder	isate	
If change of ownership give name and address of previous owner			
DESCRIPTION OF WELL AND	LEASE IN he Per Me Per Meli No. Pool No.	medically formation under ig.	Kind of Lease
Epperson "B"	1 (Inbe	-Permo Penn. Ext.)	State, Federal or Fee Fee
	60 Feet From The North Lin	e and Feet From T	he East
Line of Section 25 , To	wn.ship 11-S Range	33-E , NMPM, Lea	County
L DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL GA	us	
Nume of Authorized Transporter of Ci	1 🗶 or Condensate 🗌	Address (Give address to which approx	
Pan American Petroleum Corp. (Trucks)		Box 1725, Midland, Texas 79701 Address (Give address to which approved copy of this form is to be sent)	
Name of Authorized Transporter of Casinghead Gas X or Dry Gas Warren Petroleum Corporation		Box 966, Lovington, New Mexico	
	Unit Sec. Twp. Rge.	Is gas actually connected? Whe	
If well produces oil or liquids, give location of tanks.	A 24 11-S 33-1	No - vented I	Pending
If this production is commingled w	ith that from any other lease or pool,	give commingling order number	
V. COMPLETION DATA	Oi! Wel: Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v
Designate Type of Completi		X	
Late Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
7-27-67	10-8-67	9965	9940
Undesig.	Name of Froducing Formation	Top Oil/Gas Pay	Tubing Depth
(Inbe-Permo Penn.Ex	tt.) Bough "C"	9877	9875 Depth Casina Shoe
9877-87; 9901-06	or Juk		9965
30		D CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
15"	11 3/4"	374	350 sx.
11"	8 5/8"	4000 996 5	525 sx.
7 7/8"	5 1/2"	9903	JEJ GA.
U TRET DATA AND DECUEST I	FOR ALLOWABLE (Test must be a	after recovery of total volume of load oil	and must be equal to or exceed top allou
OIL WELL	able for this de	epth or be for full 24 hours)	
Eate First New Cil Run To Tanks	Date of Test	Producing Method (Flow, pump, gus lij	t, etc.)
9-19-67	10-10-67 Tubing Fressure	Casing Pressure	Choke Size
Length of Test 24 hrs.	- Control of the cont	50	_
Actual Fred, During Test	OH-Bbls.	Water-Bbls.	Gas-MCF
79	41	38	46
GAS WELL Actual Frod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Actual Frod. Test-IsoryD	gengt. Or test	Edisi Goldonosto, Ninio.	
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size
VI. CERTIFICATE OF COMPLIA	NCE	OIL CONSERVA	TION COMMISSION
Carry and a Court and a Co		5	, 19
I hereby certify that the rules and	regulations of the Oil Conservation		
Commission have been complied above is true and complete to t	with and that the information given he best of my knowledge and belief.	BY	
		TITLE	
a a A			compliance with put 5 1104
C.A. Can		This form is to be filed in	compliance with RULE 1104. vable for a newly drilled or deepene
ISIA	gnature)	well this form must be accompa	nied by a tabulation of the deviation
District Engineer		tests taken on the well in accordance with RULE 111.	
(Title)		All sections of this form must be filled out completely for allowable on new and recompleted wells.	
October 11, 1967		Fill out Sections I, I., III, and VI only for changes of owner well name or number, or transporter, or other such change of condition	
	Date)		ter, or other such change of condition t be filed for each pool in multip
		completed wells.	