INSTRUCTIONS

This form is to be filed with the appropriate District Office of the Commission not later than 20 days after the completion of any newly-irilled or deepened well. It shall be accompanied by one copy of all electrical and radio-activity loan run on the well and a numerate of this entities conducted, including drill stem tests. All depths reported shall be measured depths in the case of directionally drill followed wells, true vertical depths shall also be reported. For multiple completions, Items 30 through 34 shall be reported for each zone. The form is to be filed in quintuplicate except on state land, where six copies are required. See Rule 1105.

INDICATE FORMATION TOPS IN CONFORMANCE WITH GEOGRAPHICAL SECTION OF STATE

Southeastern New Mexico

Northwestern New Mexico

T.	Anhy 1986	T.	Canyon	T.	Ojo Alamo	T.	Penn. "B"
T.	Balt	T.	Strawn	T.	Kirtland-Fruitland	T.	Penn. "C"
B.	Balt	T.	Atoka	T.	Pictured Cliffs	T.	Penn. "D"
T.	Yates 2647	T.	Miss	T.	Cliff House	T.	Leadville
т.	7 Rivers	T,	Devonian	T.	Menefee	T.	Madison
т.	Queen	T.	Silurian	T.	Point Lookout	T.	Elbert
T.		T.	Montoya	Т.	Mancos	T.	McCracken
T.	San Andres 3900	T.	Simpson	T.	Gallup	T.	Ignacio Qtzte
		T.	McKee	Bas	se Greenhorn	T.	Granite
т.	Paddock	T.	Ellenburger	т.	Dakota	T.	
T.	Blinebry	т.	Gr. Wash	T.	Morrison	T.	
T.	Тиьь 6853	Т.	Granite	Т.	Todilto	T.	
T.		T.	Delaware Sand	т.	Entrada	T.	
T.	Abo 7710	T.	Bone Springs	Т.	Wingate	T.	
T.	Wolfcamp 8957	T.		т.	Chinle	Т.	
т.	Penn	Т.		Т.	Permian	T.	
T	Cisco (Bough C) 9837	T.		Т.	Penn "A"	T.	

FORMATION RECORD (Attach additional sheets if necessary)

From	То	Thickness in Feet	Formation	From	То	Thickness in Feet	Formation
Э	1986	1986	Red beds				
1986	2636	650	Red beds, anhydrite & sal	1:			
2635	2773	137	Sandy shale & anhydrite				
2773	3900	1127	Anhydrite & salt				
3900	4640	740	Dolomite & Anhydrite				
4640	5249	609	Lime				
5249	5365	116	Dolomite & Anhydrite				
5365	7710	2345	Dolomite, sand & shale				
7710	8270	560	Red & green shale				
8270	8957	687	Shale & dolomite				
8957	9896	939	Lime & shale				
No cor	es or	tests t	aken.				

NO OF COPIES REC	EIVEO	ĺ	
DISTRIBUTI		_	
SANTA FE		_	
FILE		_	
U.S.G.S.			_
LAND OFFICE			_
TRANSPORTER	OIL		_
	RANSPORTER GAS		_
OPERATOR			_
PRCRATION OF	ICE		_
FILE U.S.G.S. LAND OFFICE TRANSPORTER GAS		-	

SANTA FE		L CONSERVATION COMM		Form C-104				
FILE	KEWUE	ST FOR ALLOWABLE		Supersedes Old C-104 and C-1 Effective 1-1-65				
U.S.G.S.	AUTHODIZAZIONIZO	AND		E11401144 1-1-0	·3			
LAND OFFICE	AUTHORIZATION TO	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS						
VOAUS DO DE OIL	+	194 7 7 14 31						
TRANSPORTER GAS								
OPERATOR								
PRCRATION OFFICE								
Operator								
The Louisian	a Land and Exploration Con	mpany						
Address								
1605 Wilco B	uilding, Midland, Texas 7	9701						
Reason(s) for filing (Check prop	er box)	Other (Please	explain)					
New V/eli X	Change in Transporter of:							
Recompletion	Oil Dry	/ Cias						
Change in Ownership	Casinghead Gas Col	ndensate						
76 -1			·					
If change of ownership give ne and address of previous owner	me							
, and the same of provided owns.								
I. DESCRIPTION OF WELL A	ND LEASE	LEASE						
Lease Name	Well No. Pool Name, Includin	g Formation	Kind of Lease	Lease No.				
State	5 Middle Lane	Permo Penn	State, Federal or Fee	ral or Fee State E.				
Locat.on					E-7324			
Unit Letter C ;	660 Feet From The north	I ine and 1980	East From The	west				
,			Feet From The	W C C C				
Line of Section 24	Township 10-S Range	33-E , NMPM,	Lea		County			
		, , , , , , , , , , , , , , , , , , , ,			County			
. DESIGNATION OF TRANSI	PORTER OF OIL AND NATURAL	GAS						
Name of Authorized Transporter	of Oil XX or Condensate	Address (Give address to	which approved cop	y of this form is to	be sent)			
Service Pipe Li	ne Co.	3411 Knoxville	Avenue, Lubb	oock. Tevas				
Name of Authorized Transporter of	i Casinghead Gas or Dry Gas	Address (Give address to	3411 Knoxville Avenue, Lubbock, Texas Address (Give address to which approved copy of this form is to be sent)					
Warren Petroleu	n Co.	i			•			
If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected	Box 1589, Tulsa, Oklahoma 74102					
give location of tanks.	B 24 10-5 33-F	E No	No					
this production is commingled with that from any other lease or pool, give commingling order number:								
COMPLETION DATA	,	or, give comminging order	number:					
Designate Type of Comp	Oil Well Gas Well	New Well Workover	Deepen Plug I	Back Same Res	v. Diff. Res'v			
Designate Type of Comp	retion = (X)			į	-			
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T	`.D.				
9-23-67	10-30-67	9896 '		9868 '				
Elevations (DF, RKB, RT, GR, et	c.; Name of Producing Formation	Top Oil/Gas Pay	Tubin	g Depth	·····			
4199' RKB	Permo Penn (Bough "C"	9846'		9856 '				
Perforcitions	, 22 Jak		Depth	Casing Shoe				
1:10	in the state of			9896				
	TUBING, CASING, A	ND CEMENTING RECORD		4				
HOLE SIZE	CASING & TUBING SIZE	DEPTH SE		SACKS CEME	ENT			
17 1/2"	13 3/8"	406'		50 sx - 2%				
12 1/4"	9 5/8"	4066'		50 sx = 2%	<u> </u>			
7 7/8"	5 1/2"	9896'		25 sx				
	2 1/16"	9856'						
. TEST DATA AND REQUES		after recovery of total volum	e of load all and more	t he enue!	and in -11			
OIL WELL		depth or be for full 24 hours)	- o, soud on and musi	oe equal to or ex	casa top attour			
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow,	pump, gas lift, etc.)					
10-29-67	10-30-67	Flow	·					
Length of Test	Tubing Pressure	Casing Pressure	Choke	Size				
15 1/2 hours	325 psi	packer		/2"				
Actual Prod. During Test	Oil-Bbis.	Water - Bble.	Gas - N					
426 Bbls fluid	324	102		64				
				<u> </u>	·			
GAS WELL								
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravit	y of Condensate				
:			3.371	,				
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-i	n) Choke	Size				
			Choke					
CERTIFICATE OF COURT	ANCE							
CERTIFICATE OF COMPLI	ANCE	OIL CO	OIL CONSERVATION COMMISSION APPROVED NOV 1907 19					
* *		ABBROVET						
Commission have been commis-	nd regulations of the Oil Conservation with and that the information gives							
above is true and complete to	the best of my knowledge and belief	BY						
_		(2) (2)	V . V					

H. Reiter Geologist (Title) November 1, 1967

(Date)

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 NULE 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.