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FILE				
U.S.G.S.				
LAND OFFICE				
TRANSPORTER	OIL			
	GAS			
OPERATOR				
PRORATION OFFICE				
Operator				
Delaware-Apache Co				
1720 W1 Reason(s) for filing	lco B	ldg . roper	60:	

March 18, 1968

(Date)

## NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWARIE

Form C-104 Supersedes Old C-104 and C-110

	FILE	. REQUEST	AND ALLUWABLE	Effective, 1-1-65	
	U.S.G.S.		AND	• • • •	
		AUTHORIZATION TO TRA	ANSPORT OIL AND NATURA	L GAS	
	LAND OFFICE	_		119	
	TRANSPORTER OIL	_			
	GAS				
	OPERATOR				
I.	PRORATION OFFICE				
	Operator				
	Delaware-Apache Con	rporation			
	Address				
	1720 Wilco Bldg N	Midland, Texas 79701			
	Reason(s) for filing (Check proper box)		Other (Please explain)		
	New Weli	Change in Transporter of:	D4344		
	Recompletion	Oil X Dry Ga	rs Pipeline is	now connected to tanks.	
	Change in Ownership	Casinghead Gas Conder	nsate		
	If change of ownership give name				
	and address of previous owner				
	DECOMPOSION OF WELL AND I	LEACE			
41.	DESCRIPTION OF WELL AND I		me, Including Formation	Kind of Lease	
	Vada State		da (Penn) ext.	State, Federal or Fee State	
	Location	K-3039 I Va	ua (rem) exc.	Doave	
			0 -		
	Unit Letter <b>J</b> ; 19	980 Feet From The <b>South</b> Lin	ne and <u>1980</u> Feet F	rom The East	
	Line of Section 16 Tow	vnship 98 Range	R-34E , NMPM,	Lea County	
III.	DESIGNATION OF TRANSPORT				
	Name of Authorized Transporter of Oil			pproved copy of this form is to be sent)	
	Service Pipeline Co	ompany Amoco Pipeline Col	3411 Knoxville Ave.	pproved copy of this form is to be sent)	
	Name of Authorized Transporter of Cas	singhead Gas 📆 💮 or Dry Gas 🦳			
	Warren Petroleum Co	ompany	P. O. Box 1589, Tul	sa, Oklahoma	
	If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected?	When	
	give location of tanks.	J 16 98 34E	No	within 60 days	
	If this production is commingled wit	h that from any other lease or pool.	give commingling order number:		
	COMPLETION DATA	in that from any other rouse of poet,	8		
		Oil Well Gas Well	New Well Workover Deeper	Plug Back Same Res'v. Diff. Res'v.	
	Designate Type of Completio	$\mathbf{x}$	X		
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
	11-22-67	1-3-68	98201	9 <b>7</b> 93'	
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
	4263.8' GL	Bough "C"	97741	9756'	
	Perforations	1 Dought	1	Depth Casing Shoe	
	9774-80, 9783-85, 9	2787_80			
	9114-00, 9103-07, 9	TURING CASING AN	CEMENTING RECORD		
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
			<del></del>	<del></del>	
	15	11 3/4	459	275	
	11	8 5/8	4000	550	
	7 7/8	4 출	9820	450	
		<u> </u>	1		
V.	TEST DATA AND REQUEST FO	OR ALLOWABLE (Test hust be a	ifter recovery of total volume of load epth or be for full 24 hours)	i oil and must be equal to or exceed top allow-	
	OIL WELL	Date of Test	Producing Method (Flow, pump, g	as lift etc.)	
	Date First New Oil Run To Tanks				
	1-3-68	1-30-68 Tubing Pressure	Casing Pressure	Choke Size	
	Length of Test	I uping Pressure	Cdang Pleasure	0.1020 0.120	
	24 hrs	011 511	Water - Bbls.	Gas - MCF	
	Actual Prod. During Test	Oil-Bbla.			
	<u>944</u>	182	762	173	
	GAS WELL		1=		
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
		7			
	Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size	
VI.	CERTIFICATE OF COMPLIANCE	C <b>E</b>	OIL CONSE	RVATION COMMISSION	
-,					
	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.		BY APPROVED 19		
	$\overline{}$	$\overline{}$	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.		
	V. 11	11			
	Koy W.	Keweg			
		ature)			
	District Production		All sections of this for	m must be filled out completely for allow-	
(Title)			able 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.