

DISTRIBUTION	
DATE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

Operator PETRO-LEWIS CORPORATION	
Address PO BOX 2250, DENVER, COLORADO 80201	
Reasons for filing (Check proper box)	
New Well <input type="checkbox"/>	Change in Transporter of:
Incompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Other (Please explain)	

If change of ownership give name and address of previous owner: MEADCO PROPERTIES, LTD. 407 W. WALL ST., MIDLAND, TEXAS

II. DESCRIPTION OF WELL AND LEASE

Lease Name THOMPSON	Well No. 1	Pool Name, Including Formation NORTH BAGLEY WOLFCAMP	Kind of Lease State, Federal or Fee FEE	Lease No.
Location				
Unit Letter M	660	Feet From The SOUTH	Line and 724	Feet From The WEST
Line of Section 23	Township 11S	Range 33E	, NMPM, LEA County	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> AMOCO	2300	Address (Give address to which approved copy of this form is to be sent) CONTINENTAL NATL. BANK, FT. WORTH, TX.
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> WARREN PETROLEUM		Address (Give address to which approved copy of this form is to be sent) PO BOX 1589, TULSA, OKLA. 74102
If well produces oil or liquids, give location of tanks.	Unit M	Sec. 23
	Twp. 11S	Rge. 33E
		Is gas actually connected? When YES 4/19/68

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
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		Tubing Depth			
Perforations					Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

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.

[Signature]  
(Signature)  
[Name]  
(Title)  
1-2-74  
(Date)

OIL CONSERVATION COMMISSION

APPROVED FEB 5 1976, 19  
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 well name or number, or transporter, or other such change of condition.

RECEIVED

7-11-1976

U.S. CONSERVATION COMMISSION  
JAMES H. M.