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NO. OF COPIES RECEIVED				
DISTRIBUTION		DONSERVATION COM	115 L	Form C-194
SANTA FE		REQUEST FOR ALLOWABLE Supersedes Old C+104 and C+11		
FILE	AND Effective 1-1-65			
U.S.G.S.	AUTHORIZATION TO TA	ANSPORT OIL AND	NATURAL GAS	
LAND OFFICE		₩ 7 a 1 7 7 1 7 7 7 7 7 7 7 7 7 7 7 7 7 7		
TRANSPORTER GAS				
OPERATOR				
PRORATION OFFICE				<u> </u>
Operator Champlin Patr	roleum Company			
Address	toreem company		· · · · · · · · · · · · · · · · · · ·	
	- Midland, Texas 79701			
Reason(s) for filing (Check proper bo		Other (Pleas	e explain)	
New Well Recompletion	Change in Transporter of: Oil X Dry G	as		
Change in Ownership	Casinghead Gas Conde	<u> </u>		
If change of ownership give name and address of previous owner				
DESCRIPTION OF WELL ANI Lease Name	Well No. Pool Name, Including F	formation	Kind of Lease	Lease No.
State "18"	2 Vada - Penn	sylv anian	State, Federal or Fee	State K-3405
Location		1000		
Unit Letter G ;	980 Feet From The North Li	ne and1980	Feet From The	East
Line of Section 18 T	ownship 10-S Range	34-E , NMPS	. Lea	County
			··· <u>·</u> ································	
DESIGNATION OF TRANSPOR	RTER OF CIL AND NATURAL GA	48		of this form is to be conti-
Name of Authorized Transporter of C Pan American Petrole			to which approved copy - Midland, -Te	of this form is to be sent) was 79701
	asinghead Gas X or Dry Gas		,	of this form is to be sent)
Warren Petroleum Cor		;	- Tulsa, Okla	
If well produces oil or liquids,	Unit Sec. Twp. Ege.	Is gas actually connec		· · · · · · · · · · · · · · · · · · ·
give location of tanks,	K 18 10-S 34-E		······	
If this production is commingled v COMPLETION DATA	with that from any other lease or pool,	give commingling orde	r number:	
Designate Type of Complet	Oil Well Gas Well	New Well Workover	Deepen Plug B	ack Same Res'v. Diff. Res'v.
				i I
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.1.	. D.
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Cil/Gas Pay	Tubing	J Depth
·				
Perforations			Depth	Casing Shoe
	TUSING, CASING, AN			
HOLE SIZE	CASING & TUBING SIZE	DEPTH S		SACKS CEMENT
······································	:	;		
			ume of load oil and must	be equal to or exceed top allow
TEST DATA AND REQUEST : OIL WELL	able for this d	epth or be for full 24 hour	s)	
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flo	w, pump, gas lift, etc.)	
	Tubled Beauty	Casing Pressure	Choke	Size
Length of Test	Tubing Pressure	Cusing Pressure	Chille	5124
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas - N	ACF
	· ·			
GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMC	E Groute	y of Condensate
Actual Prod. Test-MCF7D				
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shu	-in) Choke	Size
		ļ		
CERTIFICATE OF COMPLIA	NCE	OIL	CONSERVATION	COMMISSION
			1), 19
Commission have been complied	d regulations of the Oil Conservation with and that the information given		X Horn	/, 19
Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		BY_AA		
		TITLE 0U	PERVISOR DISTR	
A A A		This form is t	o be filed in complian	nce with RULE 1104.
Wille M/C	in a talk	If this is a roo	most for allowable for	r a newly drilled or deepened
	(nature)	well, this form must tests taken on the	it be accompanied by well in accordance w	a tabulation of the deviation with RULE 111.
District Clerk				lied out completely for allow-

(Title)

(Date)

January 10, 1970

well, this form must be accompanied by a tabulation of tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for allow-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.