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	DISTRIBUTION	in and Mexico on C	White with the state of the	Form C - : 05
	SAN'I A FE		FOR ALLONAULA	Superances we Carbo man
	FILE U.S.G.S.		ANG	Ellective i-j-65
	LAND OFFICE	AUTONIA ON ON IN	insport oil and Natural	GAS
	TRANSPORTER			
	GAS			
	OPERATOR			
1.	PRORATION OFFICE			
	ROBERTS & HAMMACK, INC.			
	Address			
	Reason(s) for filing (Check proper box		Jan Dallas (Please explain)	5201
	New Well	Change in Transporter of:		
				in Operator
	Change in Ownership	Casinghead Gas Conder		
	If change of XWXXXXX give name and address of previous owner	Notional Incord on		
	and address of previous owner		┉┶┶ᢌᢗᡄᢛᡢ᠆᠁ᢞᢇᡵ᠁ᢕᢌ᠁ᢓᢩ᠐ᢩᡘ᠁᠔ᢕᡘ	2 . Dallas, Texas 7 52.
¥¥.	DESCRIPTION OF WELL AND			
	Graham "C" State	Well No. Pool Name, including F		
	Location	M. Bagrey-	-Pennsylvania State, Feder	diorfee State K-506_
	Unit Letter <u>E</u> ; 198	50 Feet From the <u>MOT CIT</u> Lin	ne and <u>060</u> Feet From	The West
	Line of Section 17 To	wnship 11-S Range 33	<u>3-Е</u> , ммрм, І	Lea County
III.	DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of OII or Condensate Address (Give address to which approved copy of this form is to be sent)			
				··· · · · ·
	Amoco Production (Name of Authorized Transporter of Ca		Address (Give address to which appr	ulsa. Oklahoma 74102 oved copy of this form is to be sent)
	Warren Petroleum Corporation		P. O. Box 1589, Tulsa, Oklahoma 74102	
	If well produces oil or liquids.	Unit Sec. Twp. Rge.		hen
	give location of tanks. E 17 11S 33E Yes October 15, 1968			
		th that from any other lease or pool,	give commingling order number:	
IV.	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.
	Designate Type of Completing	on – (X)		
	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		1	Depth Casing Shoe
			CEMENTING RECORD	
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
			1	
v.	TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a	fter recovery of total volume of load of	l and must be equal to or exceed top allow-
	DII, WELL able for this depth or be for full 24 hours)			
	Date First New Oil Run To Tanks Date of Test		Producing Method (rlow, pump, gas lift, etc.)	
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size
	Actual Prod. During Test	Oil-Bbls.	Water-Bbis.	Gas-MCF
		·]	
	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbis. Condensate/MMCF	Gravity of Condensate
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
		ļ.		
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. ROBERTS & HAMMACK, INC.		OIL CONSERVATION COMMISSION APPROVED DEC 14 1972 Orig. Signed by	
			Joe D. Ramey	
			TITLE Dist. I. Supr	
	il il i			compliance with RULE 1104.
	the a farmant		Ti this is a request for allo	wable for a newly drilled or deepenes
	(Signature)		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 allow- able on new and recompleted wells.	
	//President			
	(Title)			
	September 14, 1972		Fill out only Sections I, well name or number, or transpo	II. III, and VI for changes of owner, rier, or other such change of condition
	(Date)			



SEP 2 1 YOP2 OIL CONSERVICION COMMA HUBLA, N. M.