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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND ~~NEW MEXICO OIL CONSERVATION COMMISSION~~
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS
JUL 31 11 50 AM '68

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

I.

Operator Champlin Petroleum Company	
Address P. O. Box 872, Midland, Texas 79701	
Reason(s) for filing (Check proper box)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input 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

II. DESCRIPTION OF WELL AND LEASE

Lease Name State "18"	Well No. 3	Pool Name, Including Formation Vaca-Pennsylvanian Undesignated	R-3472	Kind of Lease State, Federal or Fee	State	Lease No. K-3405
Location						
Unit Letter 0 ; 660 Feet From The South Line and 1980 Feet From The East						
Line of Section 18 Township 10-S Range 34-E , 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"/>	Address (Give address to which approved copy of this form is to be sent)					
Service Pipe Line Company Amoco Pipeline Co.	3411 Knoxville Ave., Lubbock, Texas					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Warren Petroleum Corporation	P. O. Box 1589, Tulsa, Oklahoma 74102					
If well produces oil or liquids, give location of tanks.	Unit K	Sec. 18	Twp. 10-S	Rge. 34-E	Is gas actually connected? No	When

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 Restv.	Diff. Restv.
	X		X					
Date Spudded 6-14-68	Date Compl. Ready to Prod. 7-22-68		Total Depth 9940		P.B.T.D. 9925			
Elevations (DF, RKB, RT, GR, etc.) 4214 DF	Name of Producing Formation Bough "C"		Top Oil/Gas Pay 9894		Tubing Depth 9879			
Perforations 9901-9911'					Depth Casing Shoe 9940			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17-1/2"	13-3/8"		401		430			
11"	8-5/8"		4110		600			
7-7/8"	5-1/2"		9940		730			

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 July 28, 1968	Date of Test July 29, 1968	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24 hrs.	Tubing Pressure 250	Casing Pressure Sealed	Choke Size 34/64
Actual Prod. During Test	Oil-Bbls. 368	Water-Bbls. 123	Gas-MCF 473

GAS WELL

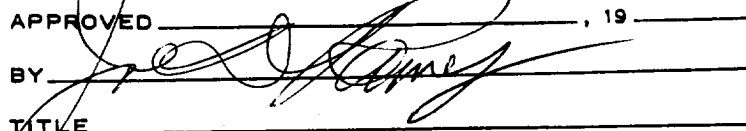
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

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.

Walter M. Randolph
Walter M. Randolph (Signature)
District Clerk
(Title)
July 30, 1968
(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 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 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