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TRANSPORTER	OIL	
	GAS	
OPERATOR		
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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 TIPPERARY OIL AND GAS CORPORATION			
Address 500 WEST ILLINOIS, MIDLAND, TEXAS 79701			
Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well <input type="checkbox"/>	Change in Transporter of:	Change in Operator name from Tipperary Corporation. Effective 6-1-74	
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"/>		

If change of ownership give name  
and address of previous owner

Lease Name Peggy Com		Well No. 1	Pool Name, including Formation North Bagley Penn	Kind of Lease State, Federal or Fee	Lease No. K-3905
Location Unit Letter E		1980 Feet From The North Line and 660 Feet From The West		& OG-5846	
Line of Section	29	Township	11S	Range	33E
				NMPM,	Lea
				County	

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)				
AMOCO PIPELINE COMPANY		2300 Continental Nat'l Bank Bldg. Fort Worth, Texas 76102				
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 COMPANY		P. O. Box 1589, Tulsa, Oklahoma 73101				
If well produces oil or liquids, give location of tanks.	Unit E	Sec. 29	Typ. 11S	Rge. 33E	Is gas actually connected? Yes	When 1-1-69

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

Designate Type of Completion - (X)		Oil Well	Gas Well	New well	Workover	Deepen	Plug Back	Same Resrv.	Diff. Resrv.
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/MCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE		OIL CONSERVATION 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.		APPROVED _____ 1974, 19	
Gloria Hardesty (Signature)		BY _____ Orig. Signed by	
Gloria Hardesty - Production Clerk (Title)		Joe D. _____ Dist. _____	
May 20, 1974 (Date)		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. Form C-104 must be filed for each pool in multiple.	