NO. OF COPIES RECEIVED DISTRIBUTION NEW MEXICO OIL CONSERVATION COMMISSIC SANTA FE REQUEST FOR ALLOWABLE FILE AND U.S.G.S. AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS LAND OFFICE OIL TRANSPORTER -GAS OPERATOR PAGRATION OFFICE MONSANTO COMPANY 101 North Marienfeld, Midland, Texas 79701 Other (Please explain) Reason's) for filing (Check proper box) ---Dry Gas Oil Change in Ownership_ Casinghead Gas X Condensate If change of ownership give name and address of previous owner ___ II. DESCRIPTION OF WELL AND LEASE Well No. Pool Name, Including Formation Kind of Lease <u>Vada (Penn.)</u> TUC State 660_ 660 Feet From The North Line and _ Feet From The _

Range 34E

or Dry Gas

10S 34E

Twp.

Rge.

Gas Well

, NMPM,

Is gas actually connected?

Workover

DEPTH SET

Yes

New Well

TUBING, CASING, AND CEMENTING RECORD

Total Depth

Top Oil/Gas Pay

Box 1589, Tulsa, Oklahoma

Lea

3411 Knoxville Ave., Lubbock, Texas

Address (Give address to which approved copy of this form is to be sent)

Deepen

Address (Give address to which approved copy of this form is to be sent)

74102

Plug Back | Same Res'v. Diff. Res'v.

SACKS CEMENT

11-16-68

CTB-189

P.B.T.D.

Tubing Depth

Depth Casing Shoe

Line of Section 30 , Township 10S

Name of Authorized Transporter of Casinghead Gas 🗶

Designate Type of Completion - (X)

V. TEST DATA AND REQUEST FOR ALLOWABLE

HOLE SIZE

Date First New Oil Run To Tanks

Actual Prod. During Test

Actual Prod. Test-MOF/D

. esting Method (pitot, back pr.)

VI. CERTIFICATE OF COMPLIANCE

Name of Authorized Transporter of Oil X

Warren Petroleum Company

If well projuces oil or liquids, give location of tanks.

IV. COMPLETION DATA

Date Spudded

Perforations

OIL WELL

Length of Test

GAS WELL

co.

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Service Pipe Line Company Amoco Pipeline Ca

G

√ 30

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

Date Compl. Ready to Prod.

Name of Producing Formation

Date of Test

Tubing Pressure

Length of Test

Tubing Pressure

1968

A. W. Wood

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.

District Production Supt.
(Title)

November 22,

(Date)

CASING & TUBING SIZE

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

State

County

	<u> </u>	
(Test must be a) able for this de	fter recovery of total volume of load pth or be for full 24 hours)	l oil and must be equal to or exceed top allow-
	Producing Method (Flow, pump, gas lift, etc.)	
	Casing Pressure	Choke Size
	Water-Bbls.	Gas-MCF
	Bols. Condensate/MMCF	Gravity of Condensate
	Casing Pressure	Choke Size
. Conservation ormation given dge and belief.	TITE This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepend well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.	
lood		
	All sections of this form must be filled out completely for allowable on new and recompleted wells. Fill out Sections I, II, III, and VI only 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	
	Separate Forms C-104 Completed wells.	must be fired for each poor in marrier,