## DISTRIBUTION SANTA FE FILE U.S.G.S. LAND OFFICE TRANSPORTER GAS OPERATOR

## REQUEST FOR ALLOWABLE AND

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

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

G	AS												
OPERATOR													
PRORATION OFFICE OPERATION													
The Maurice L. Brown Company													
Address P. O. B	Box 11	1320	), Kansas	City,	Miss	ouri 6	4112						
Reason(s) for filing (Che					<u></u>	·		other (Please	explain)			<del></del> i	
New Well			Chang	e in Tran	sporter of	!:						ļ	
Recompletion			Oll			Dry Ga	• □					İ	
Change in Ownership XX			Casin	ghead Gas	, []	Conden	sate					l	
If change of ownership and address of previous			Арє	exco, ]	[nc.,	P. O.	Box 229	9, Tulsa	, Oklahom	a 74101			
•			IFASE										
DESCRIPTION OF WELL AND LEASE  Lease Name  Well No. Pool Name, Including Fo													
Rogers			1		Vada	Penn	( Bough	"C") •	State, Federal	or Fee Fee	]		
Location Unit Letter E	F 660 Week 1000												
	Line of Section 6 Township 9S Range 35E NMPM, Lea County												
Line of Section 6			ownship	95	, A	ange	30E	, NMPM	, Lea			County	
DESIGNATION OF T	TRANS	POF	TER OF C	H. AND	NATU	RAL GA	S						
Name of Authorized Transporter of Cil XX or Condensate Address (Give address to which approved copy of this form is to be sent)													
Permian Corporation								P. 0. Box 1183. Houston, Texas 77001					
Name of Authorized Transporter of Casinghead GasXXX or Dry Gas							Address (Give address to which approved copy of this form is to be sent)						
Warren Petroleum Corporation						<del></del>	P. 0. Box 1589, Tulsa, Oklahoma 74102						
If well produces oil or li	Unit	Unit Sec. Twp. Age. E 6 9S 35E				ally connecte	ed? Whe	n 1-5-71					
give location of tanks.							Ye		<u> </u>				
If this production is co COMPLETION DATA	_	ed w	ith that fron							Not applica			
Designate Type of Completion - (X)							New Well	Workover	Deepen	Plug Back Sam	.e Res'v	. Diff. Res'v.	
Date Spudded	Date Com	Date Compl. Ready to Prod.			Total Depth			P.B.T.D.					
Elevations (DF, RKB, R	T. GR.	etc.j	Name of P	roducing I	Formation	1	Top 011/G	us Pay		Tubing Depth			
Perforations								······································		Depth Casing Sho	<b>04</b>		
							CENENT	INC DECOR		L	<del> </del>		
	TUBING, CASING, AND HOLE SIZE CASING & TUBING SIZE						DEPTH SET SACKS CEMENT						
HOLE SIZ	HOLE SIZE CASING & TUBING SIZE				OLI TITOLI								
-													
					٠,		i			İ			
TEST DATA AND R	EQUE	ST I	FOR ALLO	WABLE	(Test					and must be equal:	o or ex	ceed top allow-	
OII. WELL able for this de							Producing Method (Flow, pump, gas lift, etc.)						
										Choka Siza	Choke Size		
Length of Test			I motud bi	Tubing Pressure			Casing Pressure						
Actual Prod. During Tes	it		Oil-Bble.				Water-Bbl	8.		Gas-MCF			
GAS WELL									-			,	
Actual Prod. Test-MCF	/D		Length of	Test			Bbls. Cond	ensqte/MMC	F	Gravity of Conde	nsate		
Testing Method (pitot, b	ack pr.)	)	Tubing Pr	Tubing Pressure (Shut-in)			Casing Pressure (Shut-in)			Chake Size			
CERTIFICATE OF COMPLIANCE						OIL CONSERVATION COMMISSION							
I hereby certify that the rules and regulations of the Oil Conservation						APPROVED . 19							
Commission have been	a comp	lied	with and th	iat the ir	nformatic	n given	and the						
above is true and con	nplete	to th	ne best of t	ny knowl	edge and	belief.	BY_	XIII	y y				
ž.			•				TITLE	6. Wall	مانداب سائدا		*		
							This form is to be filed in compliance with RULE 1104.						
Miller X 12 (referen							trable is a request for allowable for a newly drilled or despensed						
Melvin J. Kleban (Figure)							well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.						
Administrator							All sections of this form must be filled out completely for allow-						
(Title)							able on new and recompleted walls.						
October 15, 1975							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.						
(Date)								Separate Forms C-104 must be filed for each pool in multiply					
				l complet	completed wells.								