NO. OF COPIES REC		
DISTRIBUTIO	N	
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
TRANSFORTER	GAS	
OPERATOR		
PRORATION OF		
Operator		

## NEW MEXICO DIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE

Form C-104
Supersedes Old C-704 and C-110

SANTAFE	-	REQUEST F	AND	SLE	Effective	: 1-1-65
U.S.G.S.	AUTHORIZA	ATION TO TRAN	AND	AND MATHRAL	GAS	
LAND OFFICE	AUTHORIZA	THUN TO TRAN	NSPORT OIL	AND NATORAL	GAS	
A DANISHORTER OIL						
TRANSPORTER GAS						
OPERATOR	_					
PRORATION OFFICE Operator						
1	Oil Corporatio	วท				
Address						
1500 Wil	co Bldg., Midl	land, Texas	79701			
Reason(s) for filing (Check proper box			O-her	(Please explain)		
New Well	Change in Trans	ריפירו	<u></u>			
Recompletion	Oil Casinghead Gas	Dry Gas Condens				
Change in Ownership	Casingheda Gas	Condens				
If change of ownership give name						
and address of previous owner						
DESCRIPTION OF WELL AND	LEASE			Kind of Led	158	Lease No.
New Mexico "U" State		Name, Including Fo	rmdtion	State, Fede	oral or Fee	V 5740
Location	2	Vada ?enn			Sta	LE   X 3/42
н 1	980 Feet From The	North Line	. and 660	Feet From	n The <b>Eas</b>	it
Unit Letter;;	Feet From The		did			
Line of Section 3	ownship 10-S	Range	33-E	, ИМРМ,	Les	County
DESIGNATION OF TRANSPOR	RTER OF OIL AND or Condens	NATURAL GAS	Address (Give a	ddress to which app	roved copy of this fo	orm is to be sent)
Name of Authorized Transporter of Of Amoco Pipeline Compan		sute			Lubbock, Tex	
Name of Authorized Transporter of Co		or Dry Gas	Address (Give a	ddress to which app	proved copy of this fo	orm is to be sent)
Warren Petroleum Corp		-	Box 1589,	Tulsa, Okla	homa 74102	
If well produces oil or liquids,		Twp. Rge.	Is gas actually	connected?	When	
give location of tanks.	H 3	10 33	Ye	5	March 1	.970
If this production is commingled w	ith that from any oth	er lease or pool,	give commingli	ng order number:		
COMPLETION DATA	Oil We			orkover Deepen	Plug Back Sa	me Res'v. Diff. Res'v
Designate Type of Complet		II Gds Well	1	1		1
Date Spudded	Date Compl. Ready	to Prod.	Total Depth		P.B.T.D.	
Date Spaces						
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing	Formation	Top Oil/Gas Po	ту	Tubing Depth	
					Depth Casing S	hoe
Perforations					Deptil Casing C	
	711011	NG, CASING, AND	CEMENTING	RECORD		
1101 5 5175		UBING SIZE		PTH SET	SACK	SCEMENT
HOLE SIZE	CASING UT	001110 0122				
			<u> </u>			
. TEST DATA AND REQUEST	FOR ALLOWABLE	(Test must be a	fter recovery of to pth or be for full	otal volume of load ( 24 hours)	oil and must be equa	l to or exceed top allo
OIL WELL Date First New Oil Run To Tanks	Date of Test	2000 100 0000		od (Flow, pump, gas	s lift, etc.)	
Date First New Cir Itali. 10 1 and						
Length of Test	Tubing Pressure		Casing Pressu	:0	Choke Size	
					Gas - MCF	
Actual Prod. During Test	Oil-Bols.		Water - Bbls.		Gus - MOF	
GAS WELL Actual Prod. Test-MCF/D	Length of Test		Bbls. Condens	ate/MMCF	Gravity of Con	densate
1.5.1.2.	_					
Testing Method (pitot, back pr.)	Tubing Pressure (	Shut-in )	Casing Pressu	re (Shut-in)	Choke Size	
get in the second second	w.		<u> </u>			
I. CERTIFICATE OF COMPLIA	NCE		1	OIL CONSER	VATION COMM	IISSION
			1	•	APRAG	19/11
I hereby certify that the rules an	d regulations of the	Oil Conservation	APPROVE	12/11	11 11	
Commission have been complied above is true and complete to	the best of my know	ledge and belief.	BY	14	X MINE	
			TITLE	-UPERVISOR	DISTRICE	
						h mil E 1104
(i) n	1				in compliance wit	ity dritted or deepen
Production Clerk		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 allow-				
4-16-7	0			asly Castless !	TV bee III III T	for changes of own
	(Date)		well name	or number, or trans	porter, or other aud	on change or condition
			Separa completed	te Forms C-104 :	must be filed for	each pool in multip
			! combieted.			

## RECEIVED

APR 19 10

CHL COURT - FOR COMM.