

DISTRIBUTION				NEW MEXICO OIL CONSERVATION COMMISSION				Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65			
SANTA FE				REQUEST FOR ALLOWABLE							
FILE				AND							
U.S.G.S.				AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS							
LAND OFFICE											
TRANSPORTER		OIL		GAS							
OPERATOR											
PRORATION OFFICE											
Operator The Maurice L. Brown Company											
Address P. O. Box 11320, Kansas City, Missouri 64112											
Reason(s) for filing (Check proper box)								Other (Please explain)			
New Well		<input type="checkbox"/>		Change in Transporter of:							
Recompletion		<input type="checkbox"/>		Oil		<input type="checkbox"/>		Dry Gas		<input type="checkbox"/>	
Change in Ownership		<input checked="" type="checkbox"/>		Casinghead Gas		<input type="checkbox"/>		Condensate		<input type="checkbox"/>	
If change of ownership give name and address of previous owner Apexco, Inc., P. O. Box 2299, Tulsa, Oklahoma 74101											
DESCRIPTION OF WELL AND LEASE											
Lease Name		Well No.		Pool Name, including Formation				Kind of Lease		Lease No.	
Willis		2		Vada Penn (Bough "C")				State, Federal or Fee		Fee	
Location											
Unit Letter		I		660		Feet From The		East		Line and 1980	
Line of Section		4		Township		9S		Range		34E	
								NMPM,		Lea	
										County	
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)							
Permian Corporation				P. O. Box 1183, Houston, Texas 77001							
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 74102							
If well produces oil or liquids, give location of tanks.		Unit		Sec.		Twp.		Rge.		Is gas actually connected?	
		H		4		9S		34E		Yes	
										When	
										5-71	
If this production is commingled with that from any other lease or pool, give commingling order number: Not applicable											
COMPLETION DATA											
Designate Type of Completion - (X)		Oil Well		Gas Well		New Well		Workover		Deepen	
Date Spudded		Date Compl. Ready to Prod.				Total Depth				P.B.T.D.	
Elevations (DF, RKB, RT, CR, 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	
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/MMCF				Gravity of Condensate	
Testing Method (pitot, back pr.)		Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)				Choke Size	
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.						OIL CONSERVATION COMMISSION					
Melvin J. Kleban (Signature)						APPROVED					
Administrator						BY					
October 15, 1975						TITLE					
(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.					
						Separate Forms C-104 must be filed for each pool in multiply completed wells.					