DISTRIBUTIO		_			
SANTA FE			_		
FILE		_			
U.S.G.S.					
LAND OFFICE					
TRANSPORTER	OIL				
	GAS				
OPERATOR					
PRORATION OFFICE					
Operator					
Midwest Oil Cor					
Address					
1500 Wilco Bldg					
Reason(s) for filing (Check proper bo					
New Well					
Recompletion	لييا				

Production Clerk

April 19, 1972

(Title)

(Date)

NEW MEXICO OIL CONSERVATION COMMIS

Form C-104

	SANTA FE	REQUEST F	FOR ALLOWABLE	Supersedes Old C-104 and C-110 Effective 1-1-65			
	FILE		AND				
}	U.S.G.S.	AUTHORIZATION TO TRAI	NSPORT OIL AND NATURAL O	SAS			
ŀ	LAND OFFICE						
	TRANSPORTER GAS						
Ì	OPERATOR						
. }	PROPATION OFFICE						
1.	Operator						
İ	Midwest Oil Corpo	oration					
	Address						
	1500 Wilco Bldg., Midland, Texas 79701						
	Reason(s) for filing (Check proper box)		Other (Please explain)				
	New Well	Change in Transporter of:					
	Recompletion	Ot: Dry Gas					
	Change in Ownership	Casinghead Gas Condens	sate				
	If the season of approaching give name						
	If change of ownership give name and address of previous owner						
II.	DESCRIPTION OF WELL AND	Well No. Pool Name, Including Fo	ormation Kind of Leas	e Lease No.			
	Lease Name			d or Fee Fee			
	Vada Lee Pruitt "B"	2 Vada Penr	•				
	P 64	60 Feet From The North Line	e and 1980 Feet From	The East			
	Unit Letter B; bt	Feet From The	dud				
	Line of Section 18 Tow	mship 9-8 Range 34	4-E , NMPM,	Lea County			
	Line of Section 20		•				
111	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA	S				
	Name of Authorized Transporter of Oil	or Condensate	Address (Give address to which appro	_			
	Mobil Pipe Line Company		P. O. Box 900, Dallas	, Texas 75221			
	Name of Authorized Transporter of Cas	inghead Gas 🗶 or Dry Gas 🗔	Address (Give address to which appro				
	Warren Pet. Corp.		P. O. Box 1589, Tulsa				
	If well produces oil or liquids,	Unit Sec. Twp. Rge.	is gas actually commercial	en			
	give location of tanks.	B 18 9-S 34-E	<u> </u>	January 10, 1972			
	If this production is commingled wit	th that from any other lease or pool,	give commingling order number:				
IV.	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.			
	Designate Type of Completic		I I I I I I I I I I I I I I I I I I I				
		Date Compl. Ready to Prod.	Total Depth	P.B.T.D.			
	Date Spudded	Bute Compt. Neddy to 110d.					
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth			
	Lievations (Dr., RRB, R1, GR, etc.)						
	Perforations			Depth Casing Shoe			
		TUBING, CASING, AND	CEMENTING RECORD				
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT			
			<u> </u>				
V.	TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a	fter recovery of total volume of load oil pth or be for full 24 hours)	and must be equal to or exceed top allow-			
	OIL WELL	Date of Test	Producing Method (Flow, pump, gas l	ift, etc.)			
	Date First New Oil Run To Tanks	5440 0. 1350					
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size			
	Length of lest						
	Actual Prod. During Test	Oil-Bols.	Water - Bbls.	Gas - MCF			
	Actual 7 .ou. 2						
	GAS WELL			10			
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate			
				Chaha Siza			
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size			
			 				
VI.	CERTIFICATE OF COMPLIAN	CE		ATION COMMISSION			
- 4.			450 0	19			
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	Signal by				
		Orig. Signed by Joe D. Raney					
		Joe D. Ranky Dist. I. Supy					
			TITLE	JISIA SQ JULY I			
			This form is to be filed in	compliance with RULE 1104.			
	Carolyn Ju	rance	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				

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