DISTRIBUTION SANTA FE FILE U.S.G.S.	REQUEST F	NSERVATION COMMISSION FOR ALLOWABLE AND NSPORT OIL AND NATURAL G	Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65 AS
LAND OFFICE IRANSPORTER OIL GAS OPERATOR PROBATION 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     Change in Transporter of:       Recompletion     Oil   Dry Gas			
Change in Ownership XXX Casinghead Gas Condensate Condensate Condensate Apexco, Inc., P. O. Box 2299, Tulsa, Oklahoma 74101			
and address of previous owner			
DESCRIPTION OF WELL AND L	Weli No.; Pool Name, Including For		cr Fee 117 AC Fee
Young Federal Comm.	1 Vada Penn (Bou		Gree II/ AC FEE
Unit LetterF : 1980 Feet From The North Line and 3300 Feet From The East			
Line of Section 7 Township 9S Range 34E , NMPM, Lea County			
DESIGNATION OF TRANSPORT	ER OF OIL AND NATURAL GAS	S Address (Give address to which approv	ed copy of this form is to be sent;
Neme of Authorized Transporter of Cil Permian Corporat	ion	P. O. Box 1183, Houston	, Texas 77001
Nome of Authorized Transporter of Casi		Address (Give address to which approv P. O. Box 900, Dallas,	
Warren Petroleum If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. P.ge. F 7 9S 34E	Is gas actually connected? Whe Yes	
If this production is commingled with that from any other lease or pool, give commingling order number: Not applicable			
COMPLETION DATA		New Well Workover Deepen	Plug Back   Same Hes'v. Diff. Res'v.
Designate Type of Completion Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Elevations (DF, RKB, RT, GR, etc.;	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
Perforations .		L	Depth Casing Shoe
TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
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	κ	1	
. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allow- able for this depth or be for full 24 hours)			
OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lij	(t, etc.)
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oli-Bbis.	Water-Bbls.	Gas-MCF
GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbis. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-ia)	Casing Pressure (Shut-in)	Choke Size
. CERTIFICATE OF COMPLIANO	CE		TION COMMISSION
		APPROVED 1, 1975	
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.		By_perry Sector	
•		TITLE	
Jelen Relen		This form is to be filed in compliance with RULE 1104. If this is a request for sllowable for a newly drilled or despend	
Melvin J. Kleban (Symicus)		If this is a request for allowable for a newly diffed of dependence 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) October 15, 1975		able 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.	
(Do	z(e)	Separate Forms C-104 mut	it be filed for each pool in multiply
		l' completed wells.	