ſ	NO. OF COPIES RECEIVED				
Ī	DISTRIBUTIO	NC			
ļ	SANTA FE				
	FILE				
	U.S.G.S.				
1.	LAND OFFICE				
	TRANSPORTER	OIL			
	IRANSPORTER	GAS			
	OPERATOR				
	PRORATION OF				

7/14/93

(Date

_	NO. OF COPIES RECEIVED					
-	DISTRIBUTION		NSERVATION COMMISSION	Form C-104		
- ⊢	SANTA FE		OR ALLOWABLE	Supersedes Old C-104 and C-110 Effective 1-1-65		
<u> </u>	FILE		AND			
⊢	U.S.G.S.	AUTHORIZATION TO TRAN	ISPORT OIL AND NATURAL GAS			
\vdash	LAND OFFICE OIL					
	TRANSPORTER GAS					
\vdash	OPERATOR					
- ⊢	PROBATION OFFICE					
1	Operator					
John L. Cox						
Γ.	Address					
		, Midland, Texas 7970				
Π	Reason(s) for filing (Check proper box)		Other (Please explain)			
	New We!1	Change in Transporter of:				
1	Recompletion	Oil Dry Gas				
L	Change in Ownership	Casinghead Gas X Condens	ate			
	change of ownership give name nd address of previous owner					
	·	FACE				
	DESCRIPTION OF WELL AND I	Well No. Pool Name, Including For	rmation Kind of Lease	Lease No.		
	Federal	l West Sawyer ((San Andres) State, Federal or	Fee Federal NM-050475		
-	Location					
	Unit Letter P; 66	O Feet From The South Line	and 810 Feet From The	East		
	Line of Section 22 Tow	mship9-S Range 37	7-E , NMPM, Lea	County		
** 1	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GAS				
11. j	Name of Authorized Transporter of Oil	or Condensate	Address (Give address to which approved	copy of this form is to be sent)		
1	Scuclock Permia	Coop				
+	Name of Authorized Transporter of Cas	singhead Gas X or Dry Gas	Address (Give address to which approved	copy of this form is to be sent)		
	Trident NGL Inc		10200 Grogans Mill Rd	I,The Woodlands,TX		
ŀ	If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected? When	77387-9359		
	give location of tanks.	P 22 9-S 37-E		<u>L4/75</u>		
		th that from any other lease or pool, g	give commingling order number:			
	COMPLETION DATA			lug Back Same Res'v. Diff. Res'v.		
	Designate Type of Completic			1		
ļ		Date Compl. Ready to Prod.	Total Depth P	.B.T.D.		
	Date Spudded	Date Compt. Neady to 1 tod.	33.42			
ŀ	Elevations (DF, RKB, RT, GR, etc.,	Name of Producing Formation	Top Cil/Gas Pay T	ubing Depth		
ļ	, , , , , , , , , , , , , , , , , , , ,					
Ì	Perforations		D	epth Casing Shoe		
1		TUBING, CASING, AND	CEMENTING RECORD			
Ì	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
ĺ						
V.	TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be af	fter recovery of total volume of load oil and pth or be for full 24 hours)	must be equal to or exceed top allow-		
	OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift,	etc.)		
	Date First New Oil Run 10 1 dates	Date 0. 1001				
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size		
	Fendin or rest					
	Actual Prod. During Test	Cil-Bbis.	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		
VI CERTIFICATE OF COMPLIANCE OIL CONSERVATION COMM			ION COMMISSION			
VI.	CERTIFICATE OF COMPLIAN	ICE	1			
	hereby certify that the rules and regulations of the Oil Conservation		APPROVED JUL 16	1993 , 19		
	Commission have been complied	with and that the information given	Orio Signe	ed by:		
	above is true and complete to the best of my knowledge and belief.		Paul Kautz			
			TITLE Geologist			
	Marke Houtel		This form is to be filed in compliance with RULE 1104.			
	The 2		I and the second for allowed	his for a newly drilled or deepened		
	/Sia	nature)	well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.			
	Martha Wittenbach.		tests taken on the well in accords	IUCA MITU KOPE III.		
		itle)	All sections of this form must be filled out completely for allowable on new and recompleted wells.			

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.

NO. OF COPIES RECEIVED			
DISTRIBUTION			
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
TRANSPORTER	GAS		
OPERATOR			
PRORATION OFFICE			

NEW MEXICO OU CONSERVATION COMMISSION

Ì	SANTA FE		1	FOR ALLOWABLE AND	331014	Supersedes Old Effective 1-1-65	C-104 and C-110
	U.S.G.S.		AUTHORIZATION TO TRA	· · · · -	ATURAL GAS		
1	LAND OFFICE			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
	TRANSPORTER	OIL					
		GAS		•			
	OPERATOR			•			
1.	PRORATION OFFI	CE					
	Operator						
	John L. C	ox					
	Address	14					
			nd, Texas 79701	101 (0)	····		
	Reason(s) for filing (C	heck proper t		Other (Please	explain)		
	New Well	╡	Change in Transporter of:	Design.		-l	
	Recompletion [┥	Oil Dry Ga:	_ _	ate gas gat	nerer	
	Change in Ownership		Casinghead Gas Conden	sate			
	If change of ownershi		•				
	DESCRIPTION OF		DIFASE				
24.	Lease Name	WELL AN	Well No. Pool Name, Including Fo	ormation	Kind of Lease		Lease No.
	Federal		1 W. Sawyer (S	an Andres)	State, Federal or Fe	* Federal	NM- 050475
	Location						
	Unit Letter P	. (660 Feet From The South Line	. and 810	Feet From The	East	
	Unit Letter		reet Flom The State Line	e und <u> </u>			
	Line of Section	22	Township 9S Range	37E , NMPM,	Lea		County
			and on our axin Marrinay Ca				
III.	DESIGNATION OF Name of Authorized To	TRANSPO	ORTER OF OIL AND NATURAL GA	Address (Give address t	ERMIAN CORP EFF	9.1.91 py of this form is to	be sent)
	The Permi			вох 1183, но			
	Name of Authorized Ti	ransporter of	Casinghead Gas or Dry Gas	Address (Give address t			be sent)
			Oil Company	Box 300, Tuls			-
			Unit Sec. Twp. Ege.	Is gas actually connecte			
	If well produces oil or give location of tanks.		P 22 9S 37E	Yes	4-	14-75	
	If this production is	commingled	with that from any other lease or pool,	give commingling order	number:		
	COMPLETION DA						
	Designate Type		Oil Well Gas Well	New Well Workover	Deepen Plug	Back Same Res	v. Diff. Res'v.
	Designate Type	or Compre			 		
	Date Spudded		Date Compl. Ready to Prod.	Total Depth	P.B	.T.D.	
				T. 011 (C D	Tub	ing Depth	
	Elevations (DF, RKB,	RT, GR, etc	.; Name of Producing Formation	Top Oil/Gas Pay	Tub	ing peptii	-
				<u> </u>	Dep	th Casing Shoe	
	Perforations					•	
			TUBING, CASING, AND	CENENTING DECOR	<u> </u>		
		. 1 50	CASING & TUBING SIZE	DEPTH SE		SACKS CEM	ENT
	HOLES	125	CASING & TUBING SIZE	52,717			
							
							
ų,	TECT DATA AND	DECLIEST	FOR ALLOWABLE (Test must be a	fter recovery of total volu	me of load oil and m	ust be equal to or e	xceed top allow-
٧.	OIL WELL	REGUESI	able for this de	epen or de jor juit 24 nours	,		
	Date First New Oil R	un To Tanks	Date of Test	Producing Method (Flou	, pump, gas lift, etc.	.)	
	Length of Test		Tubing Pressure	Casing Pressure	Cho	ke Size	
	Actual Prod. During T	est	Oll-Bbls.	Water - Bbls.	Gas	-MCF	
				1			
	GAS WELL			Bbls. Condensate/MMC	- 10	vity of Condensate	
	Actual Prod. Test-M	CF/D	Length of Test	Bols. Condensate/MMC	Gra	vity of Condensate	
			Tubing Pressure (Shut-in)	Casing Pressure (Shut	-in) Cho	oke Size	
	Testing Method (pitot	., oack pr.)	I make bleesme (Summers)	Dubling I ranama (ande		· ==	
_			NOT .		CONSERVATIO	N COMMISSION	<u> </u>
VI.	CERTIFICATE OF	F COMPLI	ANCE	012	JONSERVA I IO	. CONNINTESTO	•
	•				i .		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 o	above is true and complete to the best of my knowledge and belief.		BY		Orig. Signed	5 ÿ
			TITLE		Jee District	Ţ	

(Signature) Production Clerk

(Title)

April 17, 1975

This form is to be filed in compliance with AULE 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 NULE 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.

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