HO. OF COPIES RECEIVED	<b></b> -{			
DISTRIBUTION	NEW MEXICO OIL C	ONSERVATION COM	ric≅on	Poim C-184
SANTAFE	REQUEST	REQUEST FOR ALLOWABLE  Superacides 0		
FILE		AND		Effective 1-1-65
U.S.G.5.	AUTHORIZATION TO TRA	INSPORT OIL AND	NATURAL GAS	
LAND OFFICE	- Addition to the	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
IRANSPORTER OIL	<del></del>		-	
GAS	-			
OPERATOR	_			
PROBATION OFFICE	1			
Operator				
Saxon Oil Comp	any			
Address				
P.O. Box 2948	Midland, TX 79702	101 101		
Reason(s) for tiling (Check proper bo	×)	Other (Pleas	e explain)	
New Well	Change in Transporter of:	Change f	rom Mobil Pipe	eline to Mobil
Recompletion	OII Dry Ga	"   Trucks.		
Change in Ownership	Casinghead Gas Conder	nsate		
If change of ownership give name and address of previous owner				
PECONDETON OF WELL AND	TEASE			
I. DESCRIPTION OF WELL AND Lease Name	Well No. Pool Name, Including F	ormation	Kind of Lease	Lease No.
Lario State	1 Bar U (Penn)	Penn) State, Feder		• State
Location	T But o (rem)			,
		. 107/	E . E . E	Foot
Unit Letter 0; 6	60 Feet From The South Lin	e and	Feet From The	East
Line of Section 1 To	ownship 9-S Range 3	2-Е , ммр	. Lea	County
	•			
Name of Authorized Transporter of O	RTER OF OIL AND NATURAL GA	Address (Give address	to which approved cop	py of this form is to be sent)
Mobil Oil Corp. Crude C		P.O. Box 900.	Dallas. TX	75221
Name of Authorized Transporter of C	asinghead Gas 📉 or Dry Gas 🗍	Address (Give address	to which approved cop	by of this form is to be sent)
Cities Service Company		P.O. Box 300	Tulsa. OK	74102
	Unit Sec. Twp. Pge.	Is gas actually connec		
If well produces oil or liquida, give location of tanks.	0 1 9S 32E	Yes	! Apri	1, 1976
			•	
If this production is commingled w	with that from any other lease or pool,	give comminging order	i ildinber.	
V. COMPLETION DATA	Oil Well Gas Well	New Well Workover	Deepen Plug	Back   Same Hes'v. Diff. Res'v.
Designate Type of Complet	ion = (X)   X		- i - i - i	
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.	T.D.
1	2/7/76	9250'	g.	171' (Pkr w/Plug)
1/10/76		Top Oil/Gas Pay		ng Depth
Elevations (DF, RKB, RT, GR, etc.)		9138'	l a	160'
4421' KB, 4407' GR	Bough "B"	7130		h Casing Shoe
Perforations	) 1 TODE			
9138' - 9150' (13 Hole				
	TUBING, CASING, AND	- Y	,	SACKS CEMENT
HOLE SIZE	CASING & TUBING SIZE	DEPTHS		
11"	8-5/8"	3650'		400 sx
7-7/8"	5-1/2"	9250'		250 sx
		<u> </u>		
V. TEST DATA AND REQUEST I	FOR ALLOWABLE (Test must be a	feer recovery of total vol	ime of load oil and mu	ist be equal to or exceed top allow
OIL WELL	able for this de	epth or be for full 24 hou		1
Date First New Oil Run To Tanks	Date of Tost	Breducing Methed (Flo	w, pump, gos lijt, etc.,	,
3-29-76	3-29-76	Swab		
Lengto of Test	Tubing Pressure	Casing Pressure	Chuk	ke Size
24				
Actual Fred, During Test	Oil-Bble.	Water Bble.	Gae	-MOF
	16	100		
I				
GAS WELL		\		
Actual Fred, Test-MCF/D	Length of Test	Bbls. Condensete/MM	F Grav	rity of Condensate
7.5.5.7.5.5.7.5.7.5				
Testing histhed (pitot, back pr.)	Tubing Processes (Shut-in)	Casing Pressure (Shu	c-in) Chol	ke Size
Leating Method (pitot, once pis)		•		
		1	CONSERVATION	N COMMISSION
I. CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION		
		APPROVED	SEP 28 19	19
I hereby cortify that the rules and	d regulations of the Oil Connervation	1)		
Commission have been compiled with and that the information given compiled to the best of my knowledge and belief.		BYOrig. Signed In		

(Signature)

(Title)

Jerry Sexton Dist 1, Supra

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly difficit or despended well, this form must be accompanied by a tablishing of the deviation on the well in accordance with nucle 111. All sections of this ferm must be filled out completely for eliousable on new and recompleted walls.

FIII out only Sections I. H. III, and VI for chin on of evener, well name or number, or transporter, or other such Change of ecodition.

9-24-79 (Date)

Production Superintendent