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LAND OFFICE		XX
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

I. Operator
Tipperary Oil & Gas Corporation
Address
P. O. Box 3179, Midland, TX 79702
Reason(s) for filing (Check proper box)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Tipperary 22 State	Well No. 1	Pool Name, Including Formation North Bagley Permo Penn	Kind of Lease State, Federal or Fee	State State	Lease No. V-980
Location Unit Letter <u>C</u> ; <u>660</u> Feet From The <u>North</u> Line and <u>1980</u> Feet From The <u>West</u> Line of Section <u>22</u> Township <u>11S</u> Range <u>33E</u> , NMPM, <u>Lea</u> County					

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Lantern Petroleum Corp.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 2281, Midland, TX 79702				
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Warren Petroleum Corporation	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1589, Tulsa, Oklahoma 74102				
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 22	Twp. 11S	Rge. 33E	Is gas actually connected? When Yes 10-3-84

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well XX	Gas Well --	New Well XX	Workover --	Deepen --	Plug Back --	Same Res'v. --	Diff. Res'v. --
Date Spudded 7-11-84	Date Compl. Ready to Prod. 9-5-84		Total Depth 10,660'		P.B.T.D. 10,253'			
Elevations (DF, RKB, RT, GR, etc.) 4258.6 GR	Name of Producing Formation Permo Penn		Top Oil/Gas Pay 8973'		Tubing Depth 9,952'			
Perforations 9890-9900;9857-9863;9431-9433;9419-9422;9331-9334;9313; 9258-9263		9321-9324;		Depth Casing Shoe 10,658'				
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17-1/2"	13-3/8"		350'		375 sx			
12-1/4"	9-5/8"		3,750'		600 sx			
8-5/8"	7"		10,658'		1200 sx			

V. 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)

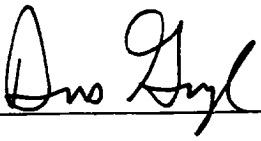
Date First New Oil Run To Tanks 9-5-84	Date of Test 10-31-84	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hours	Tubing Pressure 20	Casing Pressure 20 psi	Choke Size 2"
Actual Prod. During Test	Oil-Bbls. 28	Water-Bbls. 75	Gas-MCF 271

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

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.


(Signature)
Drilling Production Supervisor
(Title)

OIL CONSERVATION COMMISSION
APPROVED NOV 13 1984 , 19
Eddie W. Seay
BY Oil & Gas Inspector
TITLE _____

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 allow-

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