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ļ	DISTRIBUTION		NSERVATION COMMISSIC.	Form C-104 Supersedes Old C-104 and C-110
		AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS		Effective 1-1-65
ł	FILE U.S.G.S.			c
ł			10 \sim	5
	OIL		15 9 29 AH 168	
	TRANSPORTER GAS		1. 1. 1. 1 .	
	OPERATOR			
1.	PRORATION OFFICE			
	Operator			
	ROGER C. HANKS, LTD.			
		uilding, Wichita Fal	ls. Texas 76301	
	Reason(s) for filing (Check proper box)		Other (Please explain)	
	New Well X Re-entr	Change in Transporter of:	Request Allowa	ble
	Recompletion	Oil Dry Gas		
	Change in Ownership	Casinghead Gas Condens	sate	
	If change of ownership give name and address of previous owner			· · · · · · · · · · · · · · · · · · ·
		the the	- t t	
II.	DESCRIPTION OF WELL AND L	Well No. Pool Name, Including For Well No. Pool Name, Including For	rmation stilling wild Kind of Lease	Lease No.
	Collins-Federal	1 Underland		Fee Federal BLM #NM
	Location		R-3530	0357759
	Unit Letter J ; 198	OFeet From TheSouth Line	and Feet From Th	e East
			AAD NUMBER BOOM	county
	Line of Section 19 Town	nship 8S Range	34E , NMPM, ROOSE	Vert
	DESIGNATION OF TRANSPORT	ED OF OH AND NATURAL GAS	8	
ш.	Name of Authorized Transporter of Oil	or Condensate	Address (Give address to which approve	d copy of this form is to be sent)
	Admiral Crude 01	1 Corporation	P. O. Box 1713, Midl	and, Texas 79701
	Name of Authorized Transporter of Cast	inghead Gas or Dry Gas	Address (Give address to which approve	d copy of this form is to be sent)
			Le ras actually connected? When	
	If well produces oil or liquids,	Unit Sec. Twp. Ege.	is gas actually semicirca,	
	give location of tanks.	J 19 8S 34E	No	
	If this production is commingled with 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 Completion	n - (X)	Re-entry	1
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
	4-21-68	5-20-68	9200 •	9200•
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
	4320 · DF	Bough "C"	9192*	7783 • Depth Casing Shoe
	Perforations 9192* - 9200*			
	3132 - 3200	TUBING, CASING, AND	CEMENTING RECORD	
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
	7 7/8"	5 1/2"	4584' w/ ceg. bowl	75 sacks
			tied back into pre-	
			viously shot off	
	2 3/8" 7783' 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-			
V	able for this depth or be for full 24 hours)			
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift	1
	5-27-68	8-12-68	Kobe Triplex, Sarge	nt 2 3/4" Fixed Cag. Choke Size
	Length of Test	Tubing Pressure	Casing Pressure	Pump
	24 hours	Oil-Bbls.	Water - Bbls.	Gas - MCF
	Actual Prod. During Test 730	30	700	TSTM
	GAS WELL			T
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
			Contant Description of about a days	Choke Size
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	
				TION COMMISSION
V	I. CERTIFICATE OF COMPLIAN	CE	UIL CONSERVA	
	and a stand of the stand of the oil Concentration		APPROVED 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.		BY John W. Kungan	
/			This form is to be filed in a	compliance with RULE 1104.
(Kon C. Hanky kn teber Medera		restrictions a sequent for allowable for a newly drilled or deepened	
	(Signature)		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- able on new and recompleted wells.	
	General Partner			
	(Title)			
		968	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.	
		ate)		