	NO. OF CONICS RECEIVED						
	0.57.336T,0N			. •			
•	SANTA FE		EXICO OIL CONSERVATION COMMISSI			Form C-104	
		REQUESI	FOR ALLOWABLE		Supersedes Vid	Supersedes Old C-104 and C-110 Filenting to take	
	FILE	•	AND				
	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS						
	TRANSPORTER - O.L	: :			- 47 A 189		
	GAS :	: :	•		<b>3</b>		
!	OPERATOR	<u>.</u>			•		
Ι.,	PROKATION OFFICE	<u> </u>		<del> </del>			
	Specialor State of Market Company of the Company of	MITT TO COM					
	UNION TEXAS PETROLEUM						
		ILDING - MIDLAND, $^{\prime\prime}$ TEXAS $^{\circ}$	79701.			•	
	Reason(s) for filing (Check proper box,		Other (Please	explain)	·		
:	New Wet.	Change in Transporter of:	Change T	Vell Name	and Number	ليا	
	Recompletion	Oii Dry G	as 🔲 from: T	aylor No.	. 8		
	Change in Ownership 🔀	Casinghead Gas Conde	Ensate LEffective	re 8-1-69			
•	Change of ownership give name and address of previous owner	BTA Oil Producers - 1	104 S. Pecos M	idland, Te	exas 79701		
II.	DESCRIPTION OF WELL AND Decree Name	Well No. Pool Name, Including	Formation	Kind of Lease		Lease No.	
	Milnesand Unit 128 <u>Wilnesand - San Andres</u> State, Federal or Fe				or Fee Fee		
-	Location		oan andres	<u> </u>		·	
:	Unit Letter C : 660 Feet From The North Line and 1900.5 Feet From The West						
:	Line of Section 7 Tov	vaship 8-S Range	35-E , NMPM	. Roos	sevelt	County	
1						-	
III.	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL G	AS			<del>,</del>	
	Name of Authorized Transporter of Off Condensate Address (Give address to which approved copy of this form is to be sent)						
:	Mobil Pipeline Company Box 900 Dallas, Texas 752				s 75221	10.0001	
	Name of Authorized Transporter of Casinghead Gas V or Dry Gas Address (Give address to which approve				ea copy of this form is to	pe sent/	
	Sinclair Oil and Gas   Box 11.70 - Midland Texas 79701   Unit   Sec.   Twp.   Rge.   Is gas actually connected?   When					<del></del>	
:	if well produces oil or liquids.	1 1	.	:	 November 7, 1962		
		M 7 8 S 35 E	Yes		Ovember 7, 1702		
	f this production is commingled wil	h that from any other lease or pool	, give commingling orde	r number:		<del></del>	
١٧٠,	COMPLETION DATA	Oil Well Gas Well	New Well Workover	Deepen	Plug Back   Same Res	v. Diff. Restv.	
!	Designate Type of Completic	$\operatorname{on} = (X)$	i i		1	<u> </u>	
	Date Spudgod	Date Compl. Ready to Prod.	Total Depth		P.B.T.D.		
					T. V. D. V.		
•	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oll/Gas Pay		Tubing Depth	•	
!		<u> </u>	<u> </u>		Depth Casing Shoe		
:	Perforations						
	TUBING, CASING, AND CEMENTING RECORD						
	0.5575	CASING & TUBING SIZE	DEPTH S		SACKS CEM	NT	
	HOLE SIZE	CASING & TODING SIZE					
•							
					ļ		
:				<del> </del>	<u>i </u>		
٧.	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						
	ON WELL						
	Date First New Oil Run To Tanks	Date of 199f	Floracting Manage 15 see		•		
		Tubing Pressure	Casing Pressure		Choke Size		
	Langth of Tost	. abing 1 ross = 1		1.1			
	Actual Proc. During Test	Oll-Bala.	Water-Bble.		Gas - MCF		
;	The same of the sa						
i			<del></del>				
	GAS WELL						
	Actual Prod. Tebt MCF/D	Langth of Test	Bbls. Condensate/MMC	F	Gravity of Condensate		
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in )	Cosing Pressure (Shui	:-1n )	Choke Size		
		1			<u> </u>		
vi.	CERTIFICATE OF COMPLIAN	CE .	OIL	CONSERVA	TION COMMISSION	I	
					1927. 1000	19	
	I hereby certify that the rules and	regulations of the Oil Conservation	APPROVED	1 1	1		
	Commission have been complied above is true and complete to the	with and that the information given a best of my knowledge and belief	BY	X XX	Chry		
	moder to the mile complete to the	,,,		V/	1.0		

August 15,

(Suic)

UPERVISOR DISTRICT F

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

If this is a request for allowable for a newly drilled or deepened 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 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.