| | - | | | | |
|--|---------------------------|--------------------|--|--|--|
| NO. OF COPIES RECEIVED | | | , ere | | |
| DISTRIBUTION | | | CONSERVATION COMMISSION | Form C-104 | |
| SANTA FE | + | REQUEST | FOR ALLOWABLE | Supersedes Old C-104 and C-116 Effective 1-1-65 | |
| U.S.G.S. | AUTHO | NOIZATION TO TO | AND ANSPORT OIL AND NATUR | A1 CAS | |
| LAND OFFICE | AUTHO | IRIZATION TO TRA | AL GAS | | |
| OIL | | | | : | |
| TRANSPORTER GAS | | | | | |
| OPERATOR | | | | | |
| I. PRORATION OFFICE | | | | | |
| Operator Champlin Petr | oleum Company | | Non-operator: Warren American Oil C | ompany | |
| Address | | | | • | |
| Reason(s) for filing (Check | 7, Midland, Texa | | Other (Please explain, |) | |
| New Well | Chan je ir | Transporter of: | | | |
| Recompletion | Oil | Dry Go | is | | |
| Change in Ownership | Casinghed | ad Gas Conde | nsate | | |
| If change of ownership gi and address of previous o | | | | | |
| II. DESCRIPTION OF WE | | | | | |
| Lease Name | | | me, Including Formation | Kind of Lease | |
| Hondo-S | tate | 3 Und | esignated-San Andres | State, Federal or Fee State | |
| Unit Letter D | ; 660 Feet Fro | m The North Li | ne and 660 Feet l | From The West | |
| Line of Section 32 | , Township 7- | S Range | 33-E , NMPM, R | cosevelt County | |
| l | | | | | |
| II. DESIGNATION OF TR | ANSPORTER OF OIL | AND NATURAL GA | Address (Give address to which | approved copy of this form is to be sent) | |
| i | Corporation | | P. O. Box 3119, M | idland. Taxas | |
| Name of Authorized Transp | | or Dry Gas | Address (Give address to which | approved copy of this form is to be sent) | |
| If well produces oil or liquative location of tanks. | | . Twp. Rge. | Is gas actually connected? | When | |
| | | | give commingling order number | r: | |
| If this production is community. COMPLETION DATA_ | ningled with that from an | | | | |
| Designate Type of | | Oil Well Gas Well | New Well Workover Deep | en Plug Back Same Restv. Diff. Restv. | |
| | | X : | X | | |
| Date Spudded | 1 | Ready to Prod. | Total Depth | F.B.T.D. | |
| 4-22-65 | | ucing Formation | 4385 Top Oil/Gas Pay | 4375 Tubing Depth | |
| Undesignate | 1 | ndres | 4283 [†] | 4239 ' | |
| Perforations 2 holes | | mer co | 4203 | Depth Casing Shoe | |
| | | 7-19. 2 @ 4325 | 4328-30,2@ 4334, 43 | 38-40 4384' | |
| | | TUBING, CASING, AN | D CEMENTING RECORD | | |
| HOLE SIZE | | & TUBING SIZE | DEPTH SET | SACKS CEMENT | |
| 12-1/4" | | -5/8 " | 404 | 300 sx. | |
| 7-7/8" | 4 | -1/2" | 43841 | 350 sx. | |
| | | <u> </u> | | | |
| V. TEST DATA AND REC | QUEST FOR ALLOWA | BLE (Test must be | after recovery of total volume of lo | ad oil and must be equal to or exceed top allow | |
| OIL WELL | | able for this d | epth or be for full 24 hours) | | |
| Date First New Oil Run To | Tanks Date of Test 5-10 | -65 | Froducing Method (Flow, pump, gas lift, etc.) Swab Test | | |
| 5-8-65 Length of Test | Tubing Press | | Casing Pressure Choke Size | | |
| 24 hours | 0 | | 0 | None | |
| Actual Prod. During Test | Oil-Bbls. | | Water-Bbls. | Gas-MCF | |
| 98.5 bbls. | 7 | 3 BO | 25.5 BW | N11 | |
| GAS WELL | | | | | |
| Actual Prod. Test-MCF/I | Length of Te | st | Bbls. Condensate/MMCF | Gravity of Condensate | |
| | | | | | |
| Testing Method (pitot, bac | k pr.) Tubing Press | ure | Casing Pressure | Choke Size | |
| VI. CERTIFICATE OF CO | OMPLIANCE | | OIL CONSE | ERVATION COMMISSION | |
| VI. CERTIFICATE OF CO | PITAL EIRISITURI | | | | |
| | | | APPROVED | | |

VI

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.

Form C-102 designating allocated acreage of

| +0 | scres | brea: | ronsta | ander cced | ATTH | abhiteserou |
|----|--------|-------|--------|------------|------|-------------|
| to | drill. | | ala | | | |
| | | | W.M | Boneult | v\ | |
| _ | | | H. 1 | BigBrown | | |
| | D4 | | O | | | |

(Title)

May 11, 1965

| This form is to be | filed in compliance with RULE 1104. |
|--------------------|---|
| | for allowable for a newly drilled or de |

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 Sections I, II, III, and VI only 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.