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SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PRORATION OFFICE			

November 18, 1965

(Date)

NEW MEXICO OIL CONSERVATION COMMISSING TO BE TO COLOR

	SANTA FE		REQUEST	FOR ALLOWABLE		U = F (\) Superse	les Old C-104 and C-110 1-1-65
	FILE			AND	Mov.22 _	O_	W 1. 1. 00
	U.S.G.S. AUTHORIZATION TO TRANSPORT OIL AND NATURAL GOS 20 14 15				5		
	TRANSPORTER OIL	OIL .					
	GAS OPERATOR						
I.	PRORATION OFFICE	7					
-	Operator Champlin Petroleum	Company	Non-Op	erator: Warren A	merican (Oil Company	r
	Address						
	P. O. Box 1797, Mi			01. (01.	7-3-1		
	Reason(s) for filing (Check proper bo	x) Change in Tro	manarter of	Other (Please	explain)		
	New Well Recompletion	Oil	Dry Go	ts 🗔			
	Change in Ownership	Casinghead G		7			
	If change of ownership give name						
	and address of previous owner	LEACE					
11.	Lease Name	Lease No.	1 .	me, Including Formation		Kind of Lease	
		ral NMO554778	4 Chav	eroo - San Andre	8 8	State, Federal o	or Fee Federal
	Location 66	60 Feet From T	he South Lir	ne and 1980	Feet From 1	The East	
	Olif Lotter						_
	Line of Section 29 To	ownship 7-S	Range	33-E , NMPM	, R	nosevelt	County
III.	DESIGNATION OF TRANSPOR	RTER OF OIL AN	D NATURAL GA	Address (Give address t	o which approx	ed copy of this fo	orm is to be sent)
	Magnolia Pipeline Co			P. O. Box 90	0,,Dallas	, Texas	
	Name of Authorized Transporter of C	asinghead Gas 🗌	or Dry Gas	Address (Give address t	o which approx	ed copy of this fe	orm is to be sent)
	None		-				
	If well produces oil or liquids, give location of tanks.	Unit Sec.	Twp. Rge. 7-S 33-E	Is gas actually connected Vented	ed? Whe	∍n	
	If this production is commingled w	rith that from any o	ther lease or pool,	give commingling order	number		
1 .	COMPLETION DATA	Oil W	Yell Gas Well	New Well Workover	Deepen	Plug Back So	me Res'v. Diff. Res'v.
	Designate Type of Complet	- 4		X	1	1	<u> </u>
	Date Spudded	Date Compl. Read		Total Depth		P.B.T.D.	
	10-26-65 Elevations (DF, RKB, RT, GR, etc.)	Name of Producing	·	4454 Top Oil/Gas Pay		Tubing Depth	
	14449 RDB	San And		4042 (+40	o 5)	4435	
	Perforations 2 Shots Eacl		200			Depth Casing S	hoe
	4288, 4308, 4318, 433	1, 4332, 4351	. , 4 398, 4406			4453	
				CEMENTING RECORD		2.000 05115115	
	HOLE SIZE		TUBING SIZE	DEPTH SE	<u>ET</u>	-	SCEMENT
	12-1/4	8-5/ 4-1/		365 4453			O sacks 5 sacks
	7-7/8	4-1/	<u> </u>	1773		1) Sacks
V.	TEST DATA AND REQUEST 1	FOR ALLOWABL	E (Test must be a	after recovery of total volu	me of load oil	and must be equa	l to or exceed top allow-
•	OIL WELL		able for this d	epth or be for full 24 hours		ft etc.)	
	_	Date First New Oil Run To Tanks Date of Test		Producing Method (Flow, pump, gas lift, etc.)			
	11-15-65 11-16-65 Length of Test Tubing Pressure		Swabbing Casing Pressure		Choke Size		
	24 hrs.	20	#	660#			
	Actual Prod. During Test	Oil-Bbls.		Water-Bbls.		Gas-MCF 14.4	
	150			<u> </u>			
	GAS WELL					To 1. (0	, -:
	Actual Prod. Test-MCF/D	Length of Test		Bbls. Condensate/MMC	F.	Gravity of Cond	iensate
	Testing Method (pitot, back pr.)	Tubing Pressure		Casing Pressure		Choke Size	
VI.	CERTIFICATE OF COMPLIA	NCE				TION COMM	
	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 40 acres previously submitted with application to drill. (Signature) P. L. Shelton		APPROVED, 19				
			Oil Conservation information given				
			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-				
	District Superintendent						

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.

Modes or Fice o. c. c.

DEVIATION TESTS TAKEN ON LAUCK-FEDERAL \$20 All 65 Unit-P, 660' FSL & 1960' FEL, Section 29, T-7-S, R-33-E, Roosevelt County, New Mexico

<u>DEPTH</u>	DEGREES
500,	1
3 67'	ī
8651	3/4
1365'	3/ •
1864 •	1-1/2
23 50'	1
2844.	- 2
2900°	2-1/4
3 205 '	2
34001	1-1/2
36751	1-1/4
389 3*	ı
4057	ī
41 93'	ī
43041	1/2
4417'	1/2

STATE OF TEXAS	_
COUNTY OF MIDLAND	-
	authority, on this day personally appeared , known to me to be the person whose name
is subscribed to the foregothe same for the purpose en	oing and soknowledged to me that he executed opressed.
Given under my hand and see A. D. 1965.	al of office this the 19th day of Mountain

Notary Public in and for

County, Texas.

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