SANTA FE REQUES	CONSERVATION COMMISSION T FOR ALLOWABLE AND HOBBS OFFICE O RANSPORT OLL AND NATURA	LGAS
LAND OFFICE IRANSPORTER GAS OPERATOR	JAN (    53	am 'bb
I. PRORATION OFFICE		
J. M. Huber Corporation		
Suite 922 Vaughn Bldg., Mid	land, Texas	
Reason(s) for filing (Check proper box)         tiew Well         Change in Transporter of:	Other (Ploase explain)	
Recompletion         Oil         Dry           Charge in Contrasting         Casinghead Gas         Contrasting	Gas densate	
If change of ownership give name	/ ·	
and address of previous owner		
	Name, Including Formation	Kind of Lease
Perry Federal 2 Sou	th Prairie San Andr	YES State, Federal or Fee Federal
Thit Letter P; 660 Feet From The East	Line and 660 Feet Fr	rom The South
Line of Section 17 , Township 8-S Range	36 <b>-</b> Е , <sub>ММРМ,</sub> Ro	oosevelt County
UL DESIGNATION OF TRANSPORTED OF OUL AND NATURAL	GAS	
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS         Name of Authorized Transporter of Oil A or Condensate         Mame of Authorized Transporter of Oil A or Condensate         McWood Corporation         2003 Wilco Building, Midland, Texas		
McWood Corporation Name of Authorized Transporter of Casinghead Gas or Dry Gas	Address (Give address to which a	pproved copy of this form is to be sent)
Unit Sec. Twp. Rge.	Is gas actually connected?	When
If well produces oil or liquids, give location of tanks. P 17 8-S 36	E No	
If this production is commingled with that from any other lease or pool IV. COMPLETION DATA	ol, give commingling order number:	
Designate Type of Completion $-(X)$	New Well Workover Deeper	Plug Back Same Res'v. Diff. Res'v.
Date Spudded Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
October 16, 1965 Nov. 3, 1965 Fcol	/5046 Top Oil/Gas Pay	5011       Tubing Depth
South Prairie San Andres	/	5000 Depth Casing/Shoe
Perforations 4963-4979	/	5046/
HOLE SIZE CASING & TUBING SIZE	NÓ CEMENTING RECORD           X         DEPTH SET	SACKS CEMENT
12-1/4" 8-5/8"	424	275
7-7/8" 4-1/2" 2-3/8"	<u> </u>	
		d oil and must be equal to or exceed top allow-
oll well able for this	s depth or ba for full 24 hours) Producing Method (Flow, pump, g	· · · · · · · · · · · · · · · · · · ·
Date First New Øil Run To Tanks Date of Test November 2, 1965 December 27, 1965	5	
Length of Test Tubing Pressure	Casing Pressure	Choke Size
24     Actual Prod. During Test     Oil-Bbls.	Water-Bbls.	Gas-MCF
115 99	16	20.7
GAS WELL	Dillo Contracto AlliCE	Gravity of Condensate
Actual Prod. Test-MCF/D Length of Test	Bbls, Condensate/MMCF	Gravity of Condensate
Tubing Method (pitot, back pr.) Tubing Pressure	Casing Pressure	Choke Size
VI. CERTIFICATE OF COMPLIANCE	OIL CONSE	RVATION COMMISSION
I hereby certify that the rules and regulations of the Oil Conservation APPROVED, 19, 19,		, 19
Commission have been complied with and that the information giv above is true and complete to the best of my knowledge and beli	en i	
11 12 mg (	This form is to be filed	in compliance with RULE 1104.
(Signature)	This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepene (Signature) (Signature)	
District Superintendent tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for allo		
(Title) able on new and recompleted wells.		ed wells. . III. and VI only for changes of owner,
(Date) (Date) (Date) (Date) (Date) (Date) (Date) (Date) (Date) (Date)		sporter, or other such change of condition.
	completed wells.	