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	NO. OF COPIES RECEIVED	4	CONSERVATION COMMISSIC: FOR ALLOWABLE AND ANSPORT OIL AND NATURAL O				
	DISTRIBUTION	NEW MEXICO OIL (CONSERVATION COMMISSION	IIUAD -Form C-104			
	SANTA FE	REQUEST	FOR ALLOWARIE	Sidesoles Old C-104 and C-11			
	FILE		AND	Effective 10-6			
	U.S.G.S.	AUTHORIZATION TO TR	ANSPORT OIL AND MATURAL C	As 2 11			
	LAND OFFICE		AND ON TOTE AND NATORAL (77 53 MI ton			
	OIL	The state of the s		~ 65			
	TRANSPORTER GAS			•			
	OPERATOR	-					
_		-					
I.	PRORATION OFFICE Operator						
		Componer Non On	X*				
	Grampiti recrotedii	combining Man-obersa	or: Warren American (Oil Company			
	Address						
	P. O. Box 1797, Mic	dland, Texas					
	eason(s) for filing (Check proper box) Other (Please explain)						
	New Well	Change in Transporter of:					
	Recompletion	Oil Dry Go	as T				
	hange in Ownership Casinghead Gas Condensate						
		oconique de Conice	modie				
	If change of ownership give name						
	and address of previous owner			·			
11.	DESCRIPTION OF WELL AND						
	Lease Name		ame, Including Formation	Kind of Lease			
	Lauck-Federal Fed. 1	NM 0554778 8 Cha	averoo-San Andres	State, Federal or Fee Federal			
	Location			1 ((()			
	Unit Letter E ; 66	50 Foot From Work	ne and 1980 Feet From T	n)			
	onit Letter ; OC	restriom ine WESU Lir	re and 1900 Feet From 1	ne North			
	I (no of Server 20	makin FI Cl	.				
	Line of Section 29 To	wnship 7-S Range	33-E , NMPM, ROOSE	velt County			
III.		<u>TER OF OIL AND NATURAL GA</u>					
	Name of Authorized Transporter of Oil		Address (Give address to which approx	ed copy of this form is to be sent)			
	Magnolia Pipeline	Company	P. O. Box 900. Dal	las. Texas			
	Name of Authorized Transporter of Cas	singhead Gas or Dry Gas	P. O. Box 900, Dal Address (Give address to which approx	ed copy of this form is to be sent)			
		Unit Sec. Twp. Rge.	Is gas actually connected? Whe	n			
	If well produces oil or liquids, give location of tanks.	J 29 7-8 33-E					
	give location of tanks.	1 1 5 55 2	No				
	If this production is commingled with	th that from any other lease or pool,	give commingling order number:				
IV.	COMPLETION DATA						
	Designate Type of Completic	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.			
	Designate Type of Completic	$\mathbf{x} = (\mathbf{x}) + \mathbf{x}$	X				
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.			
	2-8-66	2-26-66	4430 °	4426:			
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth			
	4442 RKB	San Andres	4021 (+413)	' '			
				Depth Casing Shoe			
	renormals a notes each	@ 4178, 4208, 4235, & 4324.	4247, 4252, 4275,	1 ' '			
	4279, 4292,			<u> </u>			
		TUBING, CASING, AND	D CEMENTING RECORD				
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT			
	12-1/4"	20#, H=1+0	380	250 sacks			
	7-7/8"	9.5% J-55	4430				
			1734	325 sacks			
		1					
٠.							
V.	TEST DATA AND REQUEST FO		fter recovery of total volume of load oil a	nd must be equal to or exceed top allow-			
	OIL WELL Date First New Oil Run To Tanks		epth or be for full 24 hours)				
		Date of Test	Producing Method (Flow, pump, gas life	, etc.)			
	2-24-06	2-21-66 Tubing Pressure	Sysbbing Casing Pressure				
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size			
	24 hrs.	-					
	Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas - MCF			
	272 bbls.	202	70				
			15				
	GAS WELL						
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate			
				C. 41117 OF CONCENBRIE			
	Touting Mothed (plant Last as 1	Tuhing Decrees	Cooling Discourse				
	Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size			
VI.	CERTIFICATE OF COMPLIANCE		OIL CONSERVA	TION COMMISSION			
	hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given		MAI	75			
			APPROVED	<u>4 955</u> , 19			
			,				
	above is true and complete to the	best of my knowledge and belief.	BY				
	Form C-102 designating a		Engineer Distric	·			
	acres previously submitt	ed with application to	TITLE STIGHTERS DIST. N				
	drill.		This form is to be filed in co	ompliance with BULE 1104			
	W27 R		!	_			
			well, this form must be accompan	able for a newly drilled or deepened ied by a tabulation of the deviation			
	H. N. Brown (Signa		well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.				
	District Superi		All sections of this form must be filled out completely for allow-				
	(Tit		able on new and recompleted wel				
	February 28, 1966		Fill out only Sections I, II, III, and VI for changes of owner,				
	(Da	te)	well name or number, or transporter, or other such change of condition.				
		i	Separate Forms C-104 must be filed for each pool in multiply completed wells.				
		!					

DEVIATION TESTS TAKEN ON LAUCK-VENERAL AS Unit-E, 660' FWL a 1980' FML, Section 29,32 TT-7-8, R=33-E, Roosevelt County, New Maxico

DEPTH	DEGREES
2001	1/2
2781	1/2
88o'	3/4
1385'	2,4
1842'	1/2
2323'	1
28231	î
3052'	1-1/2
36421	3/4
38901	3/4
40751	3/h
4220'	3/4
43261	3/4
4427	1/2

STATE (OF	T	EXAS					
COUNTY	OF_	МП	DIAND					
ARPORK	ME	the	harm temphrus	est houter	~	+1-4	.	

REFORE ME, the undersigned authority, on this day personally appeared

MY Regulation, known to me to be the person whose name is subscribed to the foregoing and acknowledged to me that he executed the same for the purpose expressed.

Given under my hand and seal of office this the lst day of March A. D. 1966.

Notary Public in and for Midland County, Texas

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A H	108.34
f	168) 4
E. J.	17CA

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