# DISTRIBUTION SANTA FE FILE U.S.G.S. LAND OFFICE TRANSPORTER OPERATOR DECRATION OFFICE

IJ

## REQUEST FOR ALLOWABLE O. C. C. AND

AUTHORIZATION TO TRANSPORT ON AND NATURAL CAS

Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65

TRANSPORTER GAS							
OPERATOR							
PRORATION OFFICE							
Chemplin Pe	troleum Ce	mpany Mor	o-Operator:	Warrem A	merican 011	Company	
P. O. Box 1	797, Midle	nd, Texas					
Reason(s) for filing (Check	proper box)			Other (P	lease explain)		
New Well		Change in Transpor	ter of:				
Recompletion		Oil	Dry Gas				
Change in Ownership		Casinghead Gas	Condensate				
change of ownership gind address of previous of	owner						
ESCRIPTION OF WE	LL AND LE	ASE Lease No. Wel	l No. Pool Name, In	ncluding Forma	tion	Kind of Lease	
Lease Name	me addle	Loube ite.				State, Federal or Fee	Federal
Lauck-Federal	NM 05547	70 .	11 Chaver	oo-Sen An	GF48	Diate, i danie di	1 and 1 and
Location		_	- 4			tw .	
Unit Letter	1980	Feet From The	onth Line and	19601	Feet From 5	The <b>Yest</b>	
Line of Section 29	Townsh	ip <b>7-8</b>	Range 33-E	, 1	nmpm, <b>Roosev</b> e	lt	County
Line of Section							

Unit Letter;	Feet From The	Line and	Feet Fro	m The	
Line of Section <b>29</b>	Township 7-8	Range 33-E	, NMPM, ROOSE	relt	County
DESIGNATION OF TRANSP	ORTER OF OIL AND	NATURAL GAS			1
Name of Authorized Transporter o	f Oil 🕵 or Condens	sate 🗌 Address (	Give address to which app Box 900, Dall	roved copy of this form is to	o be sent)
Megnelia Pipe Line				proved copy of this form is to	he senti
Name of Authorized Transporter o	f Casinghead Gas or	Dry Gas Address (	tyte dadress to which app	notes copy of this joint to the	
If well produces oil or liquids, give location of tanks.	Unit Sec.	Twp. Rge. Is gas ac 7-S 33-E Vente	dani, comicono.	When	
Designate Type of Comp	letion - (X)	l Gas Well New Well			
Date Spudded	Date Compl. Ready	to Prod. Total De		P.B.T.D.	
Elevations (DF, RKB, RT, GR, et	San Abdres	Formation. Top Oil/C	Gas Pay )• (+407)	Tubing Depth	
Perforations 2 shots each	6 4191, 4229, 4 4346'.	256, 4270, 4306, l	316, 4330, &	Depth Casing Shoe	
		IG, CASING, AND CEMEN	ING RECORD		
HOLE SIZE	CASING & T	UBING SIZE	DEPTH SET	SACKS CEM	
12-1/4*	8-5/8", 2	O#	377'	225 sacks - c	irculat
7-7/8"	4-1/2", 9	.54	المالمان	325 sacks	

(Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours) V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL Producing Method (Flow, pump, gas lift, etc.) Date of Test Date First New Oil Run To Tanks 4-17-66 Pumping 4-23-66 Choke Size Tubing Pressure Casing Pressure Length of Test 24 hrs. Gas - MCF Water - Bbls. Actual Prod. During Test Oil - Bbls.

GAS WELL			
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
			0) ) - 0/
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size

65

#### VI. CERTIFICATE OF COMPLIANCE

120 bbls.

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

55

previously submitted with permit to drill.

H. W. Brown (Signature)	
H. N. Brown (Signature)	
Ditrict Superintendent	
(Title)	
April 25, 1966	
(Date)	

#### OIL CONSERVATION COMMISSION

42

APPROVED 19	_
By fol Admin	
1-10000	
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 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.

### DEVIATIONS TESTS TAKEN ON LAUCK-PEDERAL #11 State Unit-X, 1980' MARS SERVICE Feation 29, T-7-5, R-33-E, Receivelt County, New Mexico. APR 27 10 54 AM '66

DEPTH	DEGREES
374*	3/4
861	3/4
1384'	3/4
1891'	1-1/4
1945	1-1/4
24751	1/2
30001	3/4
3454'	1/2
37601	1/2
4025	1/2
4174	1/1
4306	1/h 1/2

STAT	e op	TEXAS	- California
COUN	ti or_	MIDLAND	
BEFO	re me,	the unders	signed authority, on this day personally appeared
200	2 L.T 15.00	to the lor	known to me to be the person whose name is regoing and asknowledged to me that he executed mase expressed.
Give A.D.	under 1966.	my hand a	and seel of office this the 26th day of April
		No	Joyce Wood