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	GAS	
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NEW MEXICO OIL CONSERVATION COMMISSION

REQUEST FOR ALLOWABLE

AND

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

HOBBS OFFICE O. C. C.

MAY 12 10 59 AM '66

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

I.

Operator: **Champlin Petroleum Company** **Non-Operator: Warren American Oil Company**

Address: **P. O. Box 1797, Midland, Texas**

Reason(s) for filing *(Check proper box)*

New Well [X]
Recompletion [ ]
Change in Ownership [ ]

Change in Transporter of:
Oil [ ] Dry Gas [ ]
Casinghead Gas [ ] Condensate [ ]

Other *(Please explain)*

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease
Lauck-Federal NM 0554778	**12**	**Chaveroo-San Andres**	State, Federal or Fee **Federal**

Location

Unit Letter **J** ; **1980** Feet From The **South** Line and **1980** Feet From The **East**

Line of Section **29**, Township **7-S** Range **33-E**, NMPM, **Roosevelt** County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil [X] or Condensate [ ]: **Magnolia Pipe Line Company**

Address *(Give address to which approved copy of this form is to be sent)*: **P. O. Box 900, Dallas, Texas**

Name of Authorized Transporter of Casinghead Gas [ ] or Dry Gas [ ]:

Address *(Give address to which approved copy of this form is to be sent)*:

If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	J	**29**	**7-S**	**33-E**	**Vented**	

If this production is commingled with that from any other lease or pool, give commingling order number: _____

IV. COMPLETION DATA

Designate Type of Completion – (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
	X		X					

Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
4-13-66	**4-29-66**	**4440'**	**4438'**
xxx Elevation 4446' RKB	Name of Producing Formation **San Andres**	Top Oil/Gas Pay **4038 (+407)**	Tubing Depth **4402'**

Perforations **4202, 4225, 4258, 4284, 4299, 4311, 4330, 4345, 4394, & 4404' 2 Shots each.** Depth Casing Shoe **4440'**

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-1/4"	**8-5/8", 20#**	**370'**	**250 sacks - circulated**
7-7/8"	**4-1/2", 9.5#**	**4440'**	**325 sacks**

V. TEST DATA AND REQUEST FOR ALLOWABLE

(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)

OIL WELL

Date First New Oil Run To Tanks	Date of Test	Producing Method *(Flow, pump, gas lift, etc.)*	
5-6-66	**5-9-66**	**Pumping**	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hrs.	**--**	**--**	**--**
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
120 bbls.	**96**	**24**	**72**

GAS WELL

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

VI. CERTIFICATE OF COMPLIANCE

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.

See Form C-102 designating allocated acreage previously submitted with permit to drill.

B. F. Cloer *(Signature)*

B. F. Cloer

District Engineer *(Title)*

May 11, 1966 *(Date)*

OIL CONSERVATION COMMISSION

APPROVED _____, 19 _____

BY _____

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 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.

DEVIATION TESTS TAKEN ON LAUCK-FEDERAL NO. 12
State Unit-J, [redacted] 691[redacted] FEL, Section 29,
T-7-S, R-33-E, Roosevelt County, New Mexico.

DEPTH	DEGREES
373'	1
860'	3/4
1375'	3/4
1873'	1-1/2
2385'	1-1/2
2990'	2-1/2
3434'	2
3745'	1-3/4
3960'	1-3/4
4172'	1/4
4306'	3/4
4408'	1

STATE OF TEXAS

COUNTY OF MIDLAND

BEFORE ME, the undersigned authority, on this day personally appeared B. F. Cloer, 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 11th day of May A. D. 1966.

Joyce Wood
Notary Public in and for Midland, County, Texas