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NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE BS OFFICE O. C. Supersedes Old C-104 and C-110

AND

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS JAN 24 1 17 PM '67

OPERATOR PRORATION OFFICE KERN COUNTY LAND Address FIRST STATE BANK MIDLAND Reason(s) for filing (Check proper box Change in Transporter of: New Well 011 Dry Gas Recompletion Condensate Change in Ownership Casinghead Gas If change of ownership give name and address of previous owner DESCRIPTION OF WELL AND LEASE Well No. Pool Name, Including Formation O HAU (200 - SAN ANDRES State, Federal or Fee FEDERAL Feet From The NERTH Line and 1980 Feet From The EAST County Range 336 , NMPM, Township <u>78</u> Line of Section DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Oil 900 or Dry Gas BARTLESUILLE TIES SERVIC SERVICE CITIES OKLA. If well produces oil or liquids, give location of tanks. <u>75</u> 22 If this production is commingled with that from any other lease or pool, give commingling order number: COMPLETION DATA Plug Back Workover Oil Well Gas Well New Well Designate Type of Completion - (X) Total Depth P.B.T.D. Date Compl. Ready to Prod. Date Spudded Tubing Depth Top Oil/Gas Pay Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation Depth Casing Shoe Perforations TUBING, CASING, AND CEMENTING RECORD SACKS CEMENT CASING & TUBING SIZE HOLE SIZE (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) 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 Choke Size Tubing Pressure Casing Pressure Length of Test Gan - MCF Water - Bbls. Actual Prod. During Test Oil - Bbls. GAS WELL Gravity of Condensate Bbls. Condensate/MMCF Length of Test Actual Prod. Test-MCF/D Casing Pressure (Shut-in) Choke Size Tubing Pressure (Shut-in) Testing Method (pitot, back pr.) OIL CONSERVATION COMMISSION CERTIFICATE OF COMPLIANCE . 19 APPROVED 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. COMES JALCHT. 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. SECRETARY All sections of this form must be filled out completely for allowable on new and recompleted wells.

(Title)

23-67

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.