NO. OF COPIES RECEIVED			
DISTRIBUTION			
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PRORATION OFFICE			

NEW MEXICO OIL CONSERVATION COMMISSION BOOK OF THE Superior C-104 REQUEST FOR ALLOWABLE 1-05 RECTOR C-104 RECT

FILE		AND MAY 25 NSPORT OIL AND NATURAL	Il an All and
U.S.G.S.	_ AUTHORIZATION TO TRA	NSPORT OIL AND NATURAL	. Gas32 AM /EE
LAND OFFICE	-		
TRANSPORTER GAS	-		
OPERATOR			
PRORATION OFFICE			
Operator			
Champlin Petroleum Co	mpany Mon-Operator:	Warren American Oil C	ompeny
Address 2707 Md 41 o	nd Marne		
P. O. Box 1797, Midla Reason(s) for filing (Check proper bo		Other (Please explain)	
New Well	Change in Transporter of:	Office (Freder Explains)	
Recompletion	Oil Dry Gas	s 🗔	
Change in Ownership	Casinghead Gas Conden	77	
Change in Ownership			
If change of ownership give name			
and address of previous owner			
I. DESCRIPTION OF WELL AND	LEASE		
Lease Name	Well No. Pool Name, Including Fo	1	j 3
Lauck-Federal	14 Chaveroo-San	Andres State, Fed	eral or Fee Federal 0554778
Location			
Unit Letter M ; 66	O Feet From The South Line	e and <u>660</u> Feet Fro	m The West
	_		••
Line of Section 29 To	ownship 7-9 Range	3-R , NMPM, ROC	Sevelt County
	AMED OF OU AND NATURAL CA	c	
Name of Authorized Transporter of O	RTER OF OIL AND NATURAL GA	Address (Give address to which app	proved copy of this form is to be sent)
Magnolia Pipe Line C	<u> </u>	P. O. Box 900, Dellas	
Name of Authorized Transporter of C	asinghead Gas or Dry Gas		proved 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.	J 29 7-8 33-E	Vented	
	with that from any other lease or pool,	give commingling order number:	
V. COMPLETION DATA	The that from any other rease or poor,		
	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Resty. Diff. Resty.
Designate Type of Complet		X	
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
4-24-66	5 -16-6 6	44451	4421'
Elevations (DF, RKB, RT, GR, etc.)	1	Top Oil/Gas Pay	Tubing Depth
4440° DF	San Andres	4030 (+410)	
Perforations 2 holes each	@ 4200, 4222, 4264, 4275,	4290, 4309, 4325,	Depth Casing Shoe
	4344, 4394, \$ 4402*		4434 •
		CEMENTING RECORD	SACKS CEMENT
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	250 sacks - circulated
12-1/4"	8-5/8", 20#	370°	
7-7/8"	4-1/2", 9.5#	4445	325 sacks
			11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
V. TEST DATA AND REQUEST	FOR ALLOWABLE (Test must be a able for this de	fter recovery of total volume of load epth or be for full 24 hours)	oil and must be equal to or exceed top allou
Oll WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, ga	s lift, etc.)
5-14-66	5-14-66	Swabbing	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hrs.	••		**
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
173 bbls.	87	86	NIL
\		-	
GAS WELL			
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
VI. CERTIFICATE OF COMPLIA	NCE	OIL CONSER	VATION COMMISSION
I hereby certify that the rules an	d regulations of the Oil Conservation	1!	, 19
Cinsian boun been complied	with and that the information given he best of my knowledge and belief.	li	
Form C-102 designating	allocated acreage of 40	*	
acres filed with permit	·-	TITLE	
ചാഗയയയ കത്തായ നത്യർ ഉ യക് ങ്ങ ്		This form is to be filed	in compliance with RULE 1104.
7/27 name	im	TEALINE A PROPERT FOR S	Howahle for a newly drilled or deepene
H. N. Brown (Si	gnature)	well, this form must be accompanied by a tabulation of the deviati tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for allo	
District Superinten	lent		
	Title)	able on new and recompleted	l wells.
May 23, 1966		Eill and only Continue !	r it itt and VI for changes of owner
	Date)	well name or number, or trans	porter, or other such change of condition must be filed for each pool in multipl
		Separate Forms C-104 to completed wells.	must be tiled for each pool in munipi
		" combining warrant	

DEVIATION TESTS TAKEN ON LAUCK-PEDERAL NO. 14 State Unit-M, 660 FEL & 660 WL, Section 29, T-7-S, R-33-E, Roosevelt Country New Mexico.

DEPTH	DEGREES
370 '	1
867' 1024'	1 3/4
1557'	1-1/4
1955 ' 2457'	1-3/4
29641	3/4
3446 ' 3724 '	3/4 1/2
3944	1/2
4130' 4251'	3/4 1/2
4353'	$\frac{1}{2}$
4442'	1/2

STATE OF TRIAS
COUNTY OF MIDIAN D
BEFORE ME, the undersigned authority, on this day personally appeared
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 23rd day of May A.D. 1966.
Jane Was Q
Notary Public in and for Midland County, Texas