	NO. OF COPIES ACCEIVED DISTRIBUTION · SANTA FE FILE U.S.G.S. LAND OFFICE I RANSPORTER OIL GAS OPERATOR PRORATION OFFICE	REQUEST	CONSERVATION COMM YON FOR ALLOWABLE AND ANSPORT OIL AND NATURAL	Form C-104 Supersedes Old C-104 and C- Effective 1-1-65 GAS
1.	Operator Champlin Petroleum Company			
	Address			
	300 Wilco Building, Midland, Texas 79701 Reoson(s) for filing (Check proper box) Other (Please explain)			
	New Well Recompletion	Change in Transporter of: Oil Dry Go	15	
	Change in Ownership	Casinghead Gas 🚺 Conde	nsale	
	If change of ownership give name and address of previous owner			
NI.	DESCRIPTION OF WELL AND LEASE			
	Farrell-Federal	Well No. Pool Name, Including F 8 Chaveroo – Sa		1200
	Location 0 660 South 1980 Fact			
	20			
· .			33-E , NMPM, ROOSE	velt County
III.	DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil or Condensate Address (Give address to which approved copy of this form is to be sent)			
•	Name of Authorized Transporter of Casinghead Gas X or Dry Gas Address (Give address to which approved copy of this form is to be sent)			
	Cities Service Company Box 300, Tulsa, Oklahoma 74102			
	If well produces oil or liquids, give location of tanks.	A 30 7-5 33-E		6-27-66
	If this production is commingled with that from any other lease or pool, give commingling order number:			
	Designate Type of Completion - (X)		Plug Back Same Res'v. Diff. Res'	
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top O!1/Gas Pay	Tubing Depth
	Perforations		<u> </u>	Depth Casing Shos
	TUBING, CASING, AND CEMENTING RECORD			
	HOLESIZE	CASING & TUBING SIZE	DEPTHSET	SACKS CEMENT
	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 allow able for this depth or be for full 24 hours)			
	Date First New Oil Run To Tanks Date of Test		Producing kiothod (Flow, pump, gas i	lijt, eic.)
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size
	Actual Prod. During Test	Oil-Bbls.	Wator-Bbls,	Gas-MCF
	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls, Condensate/MMCF	Gravity of Condensate
	Testing Mothod (pitol, back pr.)	Tubing Pressure (Shut-in)	Caelng Prossuro (Shut-in)	Choka Siza
VI.	. CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION	
	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.		APPROVED Order	L 1075 Signed by
			BY Berry Sector Dist 1, Supv.	
			TITLE	
	<i>Ukieln Windulge</i> (Sikawe) District Clerk (Tille) January 25, 1978		This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepener 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 allow role on new and recompleted wells. Fill out only Sections I, II, III, and VI for changes of condition well name or number, or transporter, or other such change of condition	
			to the server formal Color and Completed wellar	an ben folgal dan serbi perit. Di as dotjat