DISTRIBUTION INTA FE ILE J.S.G.S. LAND OFFICE IRANSPORTER OIL GAS OPERATOR PHORATION OFFICE	REQUEST	NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS		
LAYTON ENTERP	RISES, INC.	· · · · · · · · · · · · · · · · · · ·		
A ideeus	treet, Lubbock, Texas 794	23		
leason(s) for filing (Check proper bo	x J	Other (Pleas	e explain)	
Recompletion	E E	Dry Gas Change Effective September 8, 1976		
If change of ownership give name and address of previous owner	MURPHY MINERALS CORPORATIO	ON, P.O. Drawer	2164, Ros	well, N. Mex. 88201
DESCRIPTION OF WELL AND	LEASE Well No.; Pool Name, Including F	ormation	Kind of Lease	Loose No.
Mark Federal	7 Todd Lower S	San Andres	State, Federal	or Fee Federal CO62529-/
	980 Feet From The North Lin	ie and 660	Feet From T	he East
25	wmship 7S Range 35			evelt County
	TER OF OIL AND NATURAL GA	AS		•
Mobil Pipe Line Compa		Address (Give address P. O. Box 900		ed copy of this form is to be sent) Texas 75221
Name of Authorized Transporter of Co Cities Service ()il (Co	asinghead Gas 🔀 or Dry Gas 🔂 Address (Give address to which approved copy of this form is to be sent)			
If well produces oil or liquida, give location of tanks.	Unit Sec. Twp. P.ge. 0 25 7S 35E	Is gas actually connect Yes		n
If this production is commingled w	ith that from any other lease or pool,		r number:	4-4-67
COMPLETION DATA Designate Type of Completi	on - (X)	New Well Workover	Deepen	Plug Back Same Res'v. Diff. Res'v.
Date Spudded	Date Compl. Ready to Prod.	Total Depth	<u></u>	P.B.T.D.
Ellevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oll/Gas Pay		Tubing Depth
Perforations	<u> </u>			Depth Casing Shoe
HOLESIZE	TUBING, CASING, AND CASING & TUBING SIZE	DEPTH S		SACKS CEMENT
· · · · · · · · · · · · · · · · · · ·			······	
TEST DATA AND REQUEST F OIL WELL Date First New Oil Run To Tenks	OR ALLOWABLE (Test must be a able for this de	fter recovery of total volu pth or be for full 24 hour Producing Method (Flor	5)	nd must be equal to ar exceed top allow-
Length of Test	Tubing Pressure	Casing Pressure		Choke Size
				Gae-MCF
Actual Prod. During Test	Oll-Bbls.	Water-Bble.		Gde - Mor
GAS WELL				
Actual Pros. Tost-MCF/D	Longth of Test	Bbls. Condensate/MMC	F	Gravity of Condensate
. rolling Mathod (pitot, back pr.)	Tubing Processo (Shut-in)	Casing Pressure (Shut	-in)	Choke Size
CURTIFICATE OF COMPLIAN	I CE	OIL		TION COMMISSION
I haveby certify that the rules and regulations of the Oil Conservation		APPROVED		
ormination have been complied	with and that the information given e beat of my knowledge and belief,	вү	Cite Cite	4.7
.1	Le Saiston	TITLE		
Ronald (Siar	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 texts taken on the well in accordance with RULE 111. All asctions of this form must be filled out completely for allow- able on new and recompleted wells. Fill out only Sections I. II. III, and VI for changes of owner.			
(Siar President - Laytor				
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() ()	ate)	well name or numbe	r, or transport	li, and VI for changes of owner, en or other such change of condition. be filed for each pool in multiply