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

	DISTRIBUTION	NEW MEXICO OIL (	CONSERVATION COME !ON	Press C. 104		
	SANTA FE		FOR ALLOWABLE	Form C-104 Supersedes Old C-104 and C-110		
	FILE	REGUEST	AND	Effective 1-1-65		
	U.S.G.S.	411THODIZATION TO TO	· · · · · ·			
		AUTHORIZATION TO TRA	ANSPORT OIL AND NATURAL (	GAS		
	LAND OFFICE	4				
	TRANSPORTER GAS		•			
	OPERATOR	]				
	PROPATION OFFICE	1				
1.	Operator	<u></u>				
	Kavanau Real Estate Tr					
	c/o Oil Reports & Gas Services, Inc., Box 763, Hobbs, New Mexico 88240  Reason(s) for filing (Check proper box)  Other (Please explain)					
	New We!!	Change in Transporter of:	The second section of the section of	3 3 6000		
	Recompletion	Oil Dry G	as Effective June	T, 19/1		
	Change in Ownership	Casinghead Gas Conde	ensate			
			ration, Box 763, Hobbs,	New Mexico 88240		
ш.	DESCRIPTION OF WELL AND	Well No.   Pool Name, Including F	Formation Kind of Leas	Lease No.		
	Humble Tucker	2 Chaveron-Se	n Andres State, Federa	ni or Fee Fee		
	Unit Letter K ; 1	980 Feet From The <u>South</u> Li	ne and 1980 Feet From	The West		
	Line of Section 25 Tov	waship 7 S Range	32 E , NMPM, ROOS	evalt County		
	DESCRIPTION OF TRANSPORT	TED OF OUL AND NATURAL G	A S			
III.	DESIGNATION OF TRANSPORT	or Condensate	Address (Give address to which appro	oved copy of this form is to be sent)		
	Name of Authorized Transporter of Off	or Condensate				
	Name of Authorized Transporter of Casinghead Gas or Dry Gas Add		Box 900, Dellas, Texas Address (Give address to which approved copy of this form is to be sent)			
	Cities Service Oil Com	pany	Bartlesville, Oklahom			
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. P.ge.  N 25 75 32E		3/3/68		
	<u> </u>			1		
	If this production is commingled with	th that from any other lease or poor,	, give comminging order number.			
IV.	Designate Type of Completic	Oil Well Gas Well	New Well Workover Deepen	Plug Back   Same Res'v. Diff. Res'v.		
	Designate Type of Complete		<u> </u>			
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth		
	Perforations			Depth Casing Shoe		
	TUBING, CASING, AND CEMENTING RECORD					
			DEPTH SET	SACKS CEMENT		
	HOLE SIZE	CASING & TUBING SIZE	DEFIRSE	JACKS CEMENT		
v.	TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be	after recovery of total volume of load oi	l and must be equal to or exceed top allow-		
• •	OIL WELL	able for this d	lepth or be for full 24 hours)			
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas i	ift, etc.)		
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size		
	_					
	Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	Gas-MCF		
	1	1		<u> </u>		
	GAS WELL		Table Cont. Table 2000	Gravity of Condensate		
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate		
		Division Property (Charles (Ch	Casing Pressure (Shut-in)	Choke Size		
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Costud Liessane (suggern)	J.1087 0.17		
			OIL CONSERV	ATION COMMISSION		
VI.	CERTIFICATE OF COMPLIAN	CE	UIL CONSERV	1071		
			APPROVED JUN 43	19/11 ) 19		
	I hereby certify that the rules and	regulations of the Oil Conservation	1 1 7 F F N N Y E D	7		

## VI.

Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Wonne Holles	
(Signature)	
Agent.	
Agent. (Title)	
6/18/71 (Date)	_
(Date)	

KINC! I

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 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

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JUH 2 2 1971

OIL CONSERVATION COMM.

HOBES, N. M.