SA TAFE			N Form C-104
£	KEQUE	ST FOR ALLOWABLE	Supersedes Old C-104 and (
G.S.		AND TRANSPORT OIL AND NATU	Effective 1-1-65
DOFFICE		TRANSPORT UIL AND NATU	IRAL GAS
TRANSPORTER OIL			
GAS			
PRORATION OFFICE			
Operator			
Address Gene Milfor	d dba Milford Pipe & Su		
į		ppry	
New Well	per box) Tatum, N.M. 88267	Other (Please explai	(n)
Recompletion	Change in Transporter of:		
Change in Ownership		Gas	
If change of ownership give n		Effective	Nov. 1, 1973
and address of previous owne		1206 Wilco Bldg.	Midland, TX 79701
. DESCRIPTION OF WELL Lease Name	AND LEASE Well No. Pool Name, Includin		
			f Lease Lease No
Location Hondo State		In Andres	Federal or Fee State B-1013
Unit Letter F.	660 Feet From The Mont		,
	660 Feet From The West	Eine and	From TheNorth
Line of Section 31	Township 7-8 Range	, ммрм,	Roosevelt County
DESIGNATION OF TRANS			ROOSEVELT
Name of Authorized Transporter	of Oil or Condensate	GAS	
	X		approved copy of this form is to be sent)
Name of Author 201 Pransporter	CLORING COUPERS	Aldrass (GEve address of Stop	authanias Texas 75221
1			
	ice Pine Line Company Rge.	is gas actually confected 300-	Tulsa, Oklahoma 74102
give location of tanks.		P	
If this production is commingle	ed with that from any other lease or poc	L give commingling order number	
COM LETION DATA			
Designate Type of Comp	pletion - (X)	New Well Workover Deepe	en Plug Back Same Res'v. Diff. Res'
Date Spudded	Date Compl. Ready to Prod.	Total Depth	
		. orac Deptm	P.B.T.D.
Elevations (DF, RKB, RT, GR, e	tc. j Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
Perforations			Depth Casing Shoe
HOLE SIZE		ND CEMENTING RECORD	
	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
TEST DATA AND REQUES	T FOR ALLOWABLE (Test must be	after recovery of total volume of long	d oil and must be equal to or exceed top allow
OIL WELL Date First New Oil Run To Tanks		ichen of De Jor Jun 24 hours)	
Date First New Oil Run To Tanks	Date of Test	Froducing Method (Flow, pump, g	as lift, etc.)
Length of Test	Tubing Pressure		
•	T anoth Lings of A	Cating Pressure	Choke Size
Actual Prod. During Test	Oil-Bbis.	Zaier-Bbla.	
			GdB-MCF
		an January at the start to the start to the start of the	
GAS WELL	······································		
Actual Prod. Test-MCF/D	Length of Test	Ebls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing December 4 at a state		
round homou (phot, buck prij	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
CERTIFICATE OF COMPLI	ANCE		
		OIL CONSER	VATION COMMISSION
I hereby certify that the rules and regulations of the Oil Conservation		APPROVED	. 19
-ommission have been complie	d with and that the information given the best of my knowledge and belief.		•
		BY	
A		FITLE	-
H' in	OD N	This form is to be filed	in compliance with RULE 1104.
_ Deno Il	ford		in compliance with RULE 1104. Nowable for a newly drilled or despensed
(S	ignofure)	Well, this form must be accomply well, this form must be accomply well.	npanied by a tabulation of the deviation
Oun		itests taken on the well in ac	cordance with RULE 111.
11/16/73	(Title)	able on new and recompleted	must be filled out completely for allow- wells.
	(Date)	Fill out only Sections I	, II, III, and VI for changes of owner, porter, or other such change of condition.

.1	This form is to be filed in compliance with RULE 1104.
- 11	If this is a request for allowable for a newly drilled or de
	well, this form must be accompanied by a tabulation of the de
- 14	tests taken on the well in accordance with all g the

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.