

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

OIL		
GAS		
FICE		

<b>1 Reports &amp; Gas Services, Box 763, Hobbs, New Mexico</b>	Other (Please
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Other (Please explain)

Condensate

**NM-0533777-A**

Lease No.

**Above**

Line of Section 25 Township 7 S Range 32 E, NMPM, Roosevelt County

**Bartlesville, Oklahoma**

12/16/68

**COMPLETION DATA**

COMPLETION DATA									
Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'tv.	Diff. Res'tv.
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									
HOLE SIZE	CASING & TUBING SIZE			DEPTH SET			SACKS CEMENT		

## OIL WELL

TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL		(Test must be after recovery able for this depth or be for full 24 hours)	
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

Gravity of Condensate	
0.86	0.97
0.87	0.98
0.88	0.99
0.89	1.00
0.90	1.01
0.91	1.02
0.92	1.03
0.93	1.04
0.94	1.05
0.95	1.06
0.96	1.07
0.97	1.08
0.98	1.09
0.99	1.10
1.00	1.11
1.01	1.12
1.02	1.13
1.03	1.14
1.04	1.15
1.05	1.16
1.06	1.17
1.07	1.18
1.08	1.19
1.09	1.20
1.10	1.21
1.11	1.22
1.12	1.23
1.13	1.24
1.14	1.25
1.15	1.26
1.16	1.27
1.17	1.28
1.18	1.29
1.19	1.30
1.20	1.31
1.21	1.32
1.22	1.33
1.23	1.34
1.24	1.35
1.25	1.36
1.26	1.37
1.27	1.38
1.28	1.39
1.29	1.40
1.30	1.41
1.31	1.42
1.32	1.43
1.33	1.44
1.34	1.45
1.35	1.46
1.36	1.47
1.37	1.48
1.38	1.49
1.39	1.50
1.40	1.51
1.41	1.52
1.42	1.53
1.43	1.54
1.44	1.55
1.45	1.56
1.46	1.57
1.47	1.58
1.48	1.59
1.49	1.60
1.50	1.61
1.51	1.62
1.52	1.63
1.53	1.64
1.54	1.65
1.55	1.66
1.56	1.67
1.57	1.68
1.58	1.69
1.59	1.70
1.60	1.71
1.61	1.72
1.62	1.73
1.63	1.74
1.64	1.75
1.65	1.76
1.66	1.77
1.67	1.78
1.68	1.79
1.69	1.80
1.70	1.81
1.71	1.82
1.72	1.83
1.73	1.84
1.74	1.85
1.75	1.86
1.76	1.87
1.77	1.88
1.78	1.89
1.79	1.90
1.80	1.91
1.81	1.92
1.82	1.93
1.83	1.94
1.84	1.95
1.85	1.96
1.86	1.97
1.87	1.98
1.88	1.99
1.89	2.00
1.90	2.01
1.91	2.02
1.92	2.03
1.93	2.04
1.94	2.05
1.95	2.06
1.96	2.07
1.97	2.08
1.98	2.09
1.99	2.10
2.00	2.11
2.01	2.12
2.02	2.13
2.03	2.14
2.04	2.15
2.05	2.16
2.06	2.17
2.07	2.18
2.08	2.19
2.09	2.20
2.10	2.21
2.11	2.22
2.12	2.23
2.13	2.24
2.14	2.25
2.15	2.26
2.16	2.27
2.17	2.28
2.18	2.29
2.19	2.30
2.20	2.31
2.21	2.32
2.22	2.33
2.23	2.34
2.24	2.35
2.25	2.36
2.26	2.37
2.27	2.38
2.28	2.39
2.29	2.40
2.30	2.41
2.31	2.42
2.32	2.43
2.33	2.44
2.34	2.45
2.35	2.46
2.	

GAS WELL		Bbls. Condensate/MMCF	Gravity of Condensate
Actual Prod. Test-MCF/D	Length of Test		
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

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.

(Signature)

12/19/68

(Date)

APPROVED

BY

TITL#

This form is to be filed in compliance with RULE 110.

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.

This form must be filled out completely for allow-

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 completed wells.