1.	NO. OF COPIES RECEIVED DISTRIBUTION SANTA FE FILE U.S.G.S. LAND OFFICE IRANSPORTER OIL GAS DPERATOR PRORATION OFFICE Operator PETRO GRANDE,	REQUEST	ONSERVATION COMMISSION FOR ALLOWABLE AND NSPORT OIL AND NATURAL GA	Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65
	Address       4219 Sigma Road, Dallas, Texas 75240         Reoson(s) for filing (Check proper box)       Other (Please explain)         New We!1       Change in Transporter of:         Recompletion       Oil         Other (Please explain)         Change in Ownership         Change in Ownership         Change of ownership give name and address of previous owner    Eugene E. Nearburg, 4219 Sigma Road, Dallas, Texas 75240			
11.	DESCRIPTION OF WELL AND I Lease Name Baetz-Federal Location Unit Letter N ; 660	Well No. Pool Name, Including Fo	res Associated State, Federal	NM-044216
III.	DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS		37-E , NMPM, Roosevelt County Address (Give address to which approved copy of this form is to be sent) P. O. Box 900, Dallas, Texas 75221 Address (Give address to which approved copy of this form is to be sent) Bartlesville, Oklahoma	
	If well produces oil or liquids, give location of tanks. If this production is commingled wit COMPLETION DATA Designate Type of Completio Date Spudded	Oil Well Gas Well	is gas actually connected? When YES	May 1969 Plug Back Same Res'v. Diff. Res'v.
	Elevations (DF, RKB, RT, GR, etc.) Perforations	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth Depth Casing Shoe
		TUBING, CASING, AND CASING & TUBING SIZE	D CEMENTING RECORD	SACKS CEMENT
v.	TEST DATA AND REQUEST F( OIL WELL Date First New Oil Run To Tanks		fter recovery of total volume of load oil a pth or be for full 24 hows) Producing Method (Flow, pump, gas lift	nd must be equal to or exceed top allow- , etc.)
	Length of Test Actual Prod. During Test	Tubing Pressure Oil-Bbis.	Casing Pressure Water-Bbis.	Choke Size Gas-MCF
	GAS WELL Actual Prod. Test-MCF/D Testing Method (pitot, back pr.)	Length of Test Tubing Pressure (Shat-in )	Bbls. Candensate/MMCF Casing Pressure (Shut-in)	Gravity of Condensate Choke Size
VI.	CERTIFICATE OF COMPLIANCE I hereby certify for the rule and regulations of the Oil Conservation Commission have been complete with and may the information given above is true and complete to the beat of my knowledge and telief. Lignature) Eddie J. Gelwick Production Superintendent (Title) December 25, 1972 (Date)		OIL CONSERVATION COMMISSION APPROVED <u>FF 2A 1972</u> , 19 BY <u>Addam</u> <u>e</u> <u>Algg</u> TITLE <u>OIL &amp; GAS INSPECTOR</u> 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 allow- able 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 auch change of condition. Separate Forms C-104 must be filled for each pool in multiply completed wells.	