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CISTRIBUTION			
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE		<u> </u>	L
TRANSPORTER	OIL		
	GAS	<u> </u>	
OPERATOR			
PROPATION OFFICE		1	1

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

SANTA FE	REQUEST FOR ALLOWABLE		Supersedes Old C-104 and C-11 Effective 1-1-65
FILE		AND	
U.S.G.S.	AUTHORIZATION TO TRAN	ISPORT OIL AND NATURAL G	AS
LAND OFFICE			
TRANSPORTER OIL			
GAS			
OPERATOR			
Operator	<u> </u>		
R. R. Morrison			
Address			
c/o John L. Cox,	408 West Wall, Midlan	nd, Texas 79701	
Reason(s) for filing (Check proper box)		Other (Please explain)	
New We . X	Change in Transporter of:		
Recompletion	Oil Dry Gas		
Change in Ownership	Casinghead Gas Condens	sate 🔲	
If change of ownership give name			
and address of previous owner			
DESCRIPTION OF WELL AND	LEASE		NM Lease No
Lease Name	Well No. Pool Name, Including Fo	rmation Kind of Lease	
Cities Federal	1 Und. Vada	Penn State, Federa	or Fee Federal 0328425
Location			
Unit Letter J ; 198	O Feet From The South Line	and 1980 Feet From	The <u>East</u>
		_	osevelt County
Line of Section 29	wnship 8S Range	36E , _{NMPM} , Roc	OSEVEIT County
	•		
DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GAS	S Address (Give address to which appro	and some of this form is to be sent!
Name of Authorized Transporter of Oil	or Condensate	Address (Give address to which appro	
Mobil Oil Corporat	•	P. O. Box 900, Dalla	as, Texas
Name of Authorized Transporter of Ca	singhead Gas 🔼 or Dry Gas 🗔	Address (Give address to which appro	
Cities Service Oil	. Co.	P. O. Box 300, Tulsa	
to the section of trails	Unit Sec. Twp. Ege.	13 qui docturally doctured	en
If well produces oil or liquids, quive location of tanks.	J 29 8S 36E	no	
If this production in commingled wi	th that from any other lease or pool,	give commingling order number:	
COMPLETION DATA	that how any other series in the series in t		Plug Back Same Res'v. Diff. Res
	Oil Well Gas Well	New Well Workover Deepen	Plug Back 'Same Res'v. Diff. Res
Designate Type of Completi	on – (X) X	! X ! ! !	
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
11-15-69	1-5-70	9850'	
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
4118' GR	Penn	9760'	9500
Perforations			Depth Casing Shoe
9771-83'			9850
	TUBING, CASING, AND	CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17-1/2"	12-3/4"	419'	375
11"	8-5/8"	4000'	400
7-7/8"	4-1/2"	9850'	450
7-1/8	+ 1/2		
DESCRIPTION OF THE PROPERTY OF	FOR ALLOWABLE (Test must be a	fter recovery of total volume of load of	l and must be equal to or exceed top ali
	able for this de	pro	
OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas	ift, etc.)
1-5-70	1-4-70	Pump	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hrs.			
Actua. Proa. During Test	Oil-Bbls.	Water - Bbls.	Gas-MCF
Actual Froat Duting 100t	345	450	388
		, 	
GAS WELL	Length of Test	Bbis. Condensate/MMCF	Gravity of Condensate
Actual Prod. Test-MCF/D	Paudin ot last		
	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
Teeting Method (pitot, back pr.)	raping blassma (Sunt-In)		
			ATION COMMISSION
. CERTIFICATE OF COMPLIAN	NCE	OIL CONSERV	ATION COMMISSION
		1 40000	. 19
I hereby certify that the rules and	regulations of the Oil Conservation	APPROVED	
a land to the second last	with and that the information given he best of my knowledge and belief.	BY_	4677164
above is true and complete to the	"O oon or my amenicable and serious	,	
`		TITLE	
1.7	. (/	This form is to be filed in	compliance with RULE 1104.
The transfer of		70 .1 1- 1	owehie for a newly drilled or deepe
	(nature)	II is able from more be accome	revied by a fabulation of the design
		tests taken on the well in acc	ordance with HULE 111.
Agent (Title)		All sections of this form must be filled out completely for alle able on new and recompleted wells. Fill out only Sections I. II. III. and VI for changes of own	
(Date)	Separate Forms C-104 mg	ust be filed for each pool in mult
		completed wells.	