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U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	ı
INANSFURIER	GAS	
OPERATOR		

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-104

	SANTA FE	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-11 Effective 1-1-65	
į	U.S.G.S.	AUTHORIZATION TO TRA	AND INSPORT CIL AND NATURAL		
	LAND OFFICE	AUTHORIZATION TO TRA	INSPORT OIL AND NATURA	L GAS	
	TRANSPORTER OIL				
	GAS	4	,		
	PRORATION OFFICE	†			
1.	Operator .				
	Ne-O-Tex Corpora	tion			
	Address	408 West Wall. Midl	and, Texas 79701		
	eason(s) for filing (Check proper box) Other (Please explain)				
	New Well	Change in Transporter of:	M 1 6 4 1 6 7 3 7	ng PENADA IN TIME 2001 Talayan 30 Mera ShiGhar	
	Recompletion	Oil Dry Ga Casinghead Gas Conden	FF ! .		
	Change in Ownership	Custinglied dus conden	15414		
	If change of ownership give name and address of previous owner				
II.	DESCRIPTION OF WELL AND	Well No. Pool Name, Including Fo	ormation Kind of L	ease NM-Lease No.	
	Aztec-Federal	l Vada Penn	3948 State, Fe	derdi or Fee Federal 0234351	
	Location		1000	7.7 h	
	Unit Letter ;66	Feet From The North Lin	se and 1.980 Feet Fr	om The West	
	Line of Section 26	wnship 8S Range 3	6E , NMPM, RC	oosevelt county	
	Line of Section - 10	whomp			
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil A Or Condensate Address (Give address to which approved copy of this form)					
	Name of Authorized Transporter of Ol Mobil Oil Corporat		P. O. Box 900, Da		
	Name of Authorized Transporter of Co	singhead Gas X or Cry Gas	Address (Give address to which a	oproved copy of this form is to be sent)	
	Warren Petroleum C	Corporation	P. O. Box 1589, 7		
	If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected?	When	
	give location of tanks.		<u> </u>		
IV	If this production is commingled w COMPLETION DATA	ith that from any other lease or pool,	give comminging order number:		
. .	Designate Type of Completi	On (X)	New Well Workover Deepen	Plug Back Same Restv. Diff. Restv.	
		Date Compl. Ready to Prod.	X Total Depth	P.B.T.D.	
	Date Spudded 2-19-70	3-30-70	9830'		
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay 9733'	Tubing Depth 9500	
	4070' GR	Penn	9733	Depth Casing Shoe	
	Perforations 9739-61			9830'	
	TUBING, CASING, AND CEMENTING RECORD				
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
	17-1/2"	12-3/4" 8-5/8"	400' 4000'	375	
	7-7/8"	4-1/2"	9830'	450	
				<u> </u>	
V.	TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a	ifter recovery of total volu <mark>me of load</mark> epth or be for full 24 hours)	loil and must be equal to or exceed top allow	
	OII, WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, go	as lift, etc.)	
	3-30-70	3-29-70	Flowing		
	Length of Test 24 hrs.	Tubing Pressure 350	Casing Pressure 325	Choke Size 24/64"	
	Actual Prod. During Test	Oil-Bble.	Water - Bbis.	Gas-MCF	
	Actual Float Builty 1991	368	210	386	
	·				
	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
	Actual Prod. 1001-MCF/D	Early in or 100.			
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
VI.	CERTIFICATE OF COMPLIAN	iCE	OIL CONSER	RVATION COMMISSION	
	hereby certify that the rules and regulations of the Oil Conservation		APPROVED	, 19	
	I hereby certify that the rules and regulations of the Off Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		The state of the s		
	above is true and complete to the	e beat of my knowledge and belief.	BY		
	γ	. :	TITLE		
	(Signature) Agent		This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepened		
- Alle		nature		nnanied by a tabulation of the deviation	
	, Yate	ent	tests taken on the well in a	ccordance with RULE 111.	
	1190	itle)	All sections of this form must be filled out completely for allow able on new and recompleted wells.		

31, 1970 (Date)

March

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 such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.