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SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
BRORATION OFFICE		1	

## HEW MEXICO OIL CONSERVATION COMMISSIC

Form C-104

	SANTA FE	REQUEST I	FOR ALLOWABLE	Supersedes Old C-104 and C-110 Effective 1-1-65	
	FILE		AND		
	U.S.G.S.	AUTHORIZATION TO TRA	NSPORT OIL AND NATURAL GA	S	
	OIL				
	TRANSPORTER GAS				
	OPERATOR			•	
I.	PRORATION OFFICE				
	Operator Delaware-A <b>p</b> ach	e Corporation			
	Address				
1720 Wilco Bldg. Midland, Texas 79701			tas 79701		
	Reason(s) for filing (Check proper box)		Other (Please explain)		
	New Well	Change in Transporter of:	Authorization to	transport	
	Recompletion	Oil Dry Gas  Casinghead Gas Conden	Casinghard Cas	transport	
	Change in Ownership	Casinghead Gas Conden	sale cas ///ancas sale		
	If change of ownership give name				
	and address of previous owner				
II.	DESCRIPTION OF WELL AND I	LEASE	emation Kind of Lease	Lease No.	
	Lease Name [3] Iond State Comm.	Well No.   Pool Name, Including Fo	Ign "C") State, Federal of	n kanaa a al	
	Location	1 1434 15111 (536	3.33,133.33	L737	
	f —	South	e andFeet From The	West	
	Unit Letter; 660	Feet From TheLine		i	
	Line of Section 32 Tow	rnship SS Range	BEE , NMPM, Rooseve	elt County	
III.	DESIGNATION OF TRANSPORT	FER OF OIL AND NATURAL GA	Address (Give address to which approved	d copy of this form is to be sent)	
	Mobil Pipe Line	A.A. 6. Consumerts	P. O. Box 900, Dallas, To		
	Name of Authorized Transporter of Cas	inghead Gas XX or Dry Gas	Address (Give address to which approved	d copy of this form is to be sent)	
	Warren Petroleum Corpo		P. O. Box 1589, Tulsa, 0	kla. 74101	
	If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected? When		
	give location of tanks.	M 32 8S 35E	· · · · · · · · · · · · · · · · · · ·	prox. 2 weeks	
		h that from any other lease or pool,	give commingling order number:		
IV.	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back   Same Res'v. Diff. Res'v.	
	Designate Type of Completion	n = (X)			
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
			T 011 (C D	Tubing Depth	
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
	Perforations			Depth Casing Shoe	
	1 61.5.41.5.15				
		TUBING, CASING, AND	CEMENTING RECORD		
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
v	TEST DATA AND REQUEST FO	OR ALLOWABLE (Test must be a	fter recovery of total volume of load oil an	d must be equal to or exceed top allow-	
•	OII. WELL able for this depth or be for full 24 hours)				
	Date First New Oil Run To Tanks	Date of Test	producing Method (1.10m, pamp, gos 19),		
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
	Length of Test				
	Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas - MCF	
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
	Actual Float 1001 Mol/2				
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
VI. CERTIFICATE OF COMPLIANCE OIL CONSERVATION CO		TION COMMISSION			
			APPROVED APR & 1970 19		
	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.				
			BY	ALC:	
			TIPLE		
	(Signature)  Production Clerk  well, this form must be accompanied by a tabulation of the ditests taken on the well in accordance with RULE 111.			ied by a tabulation of the daylerion	
				be filled out completely for allow-	
4-23-71		able on new and recompleted wells.  Fill out only Sections I, II, III, and VI for changes of owner,			
	4-23-11 (Date)		well name or number, or transporter, or other such change of conditions		
	(D)	,	Separate Forms C-104 must	be filed for each pool in multiply	
			completed wells.		

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APR 2 01971
OIL CONSERVATION COMM. HOBBS, N. M.