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LAND OFFICE	
TRANSPORTER	OIL GAS
OPERATOR	
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISS.
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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

Operator TED WEINER OIL PROPERTIES & CENTURY PETROLEUM LTD.	
Address 1616 OIL & GAS BLDG. FORT WORTH, TEXAS 76102	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name Ruby Jewell Thistle	Well No. 1	Pool Name, Including Formation Bluite San Andres Assoc	Kind of Lease State, Federal or Fee Fee	Lease No.
Location Unit Letter K ; 1980 Feet From The S Line and 1980' Feet From The West				
Line of Section 8 Township 8S Range 38E , NMPM, Roosevelt County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Mobil Oil Corporation	Address (Give address to which approved copy of this form is to be sent)					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> Cities Service	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit K	Sec. 5	Twp. 8S	Rge. 38E	Is gas actually connected? No	When Pending

If this production is commingled with that from any other lease or pool, give commingling order number: _____

IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 5/04/73	Date Compl. Ready to Prod. 6/20/73		Total Depth 4780		P.B.T.D. 4746'				
Elevations (DF, RKB, RT, GR, etc.) 3995.3KB, 3986.8 GL	Name of Producing Formation SAN ANDRES		Top Oil/Gas Bay 4720		Tubing Depth				
Perforations 4720-24, 26-28, 34-36, & 40-4742					Depth Casing Shoe				
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING	CASING SIZE	DEPTH SET		CEMENT				
	8 1/2"	4-1/2"	4779'		250 CKS				
	2-3/8"				3004x				

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

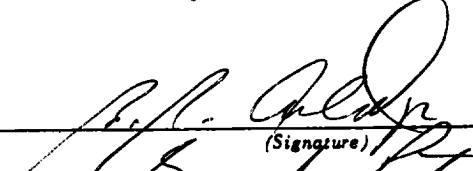
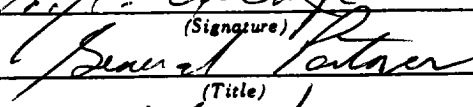
Date First New Oil Run To Tanks 6/08/73	Date of Test 6/20/73	Producing Method (Flow, pump, gas lift, etc.) FL	
Length of Test 24	Tubing Pressure 900	Casing Pressure 3000	Choke Size 257/64
Actual Prod. During Test 65	Oil-Bbls. 65	Water-Bbls. -0-	Gas-MCF 240

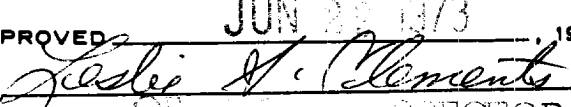
GAS WELL

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

VI. CERTIFICATE OF COMPLIANCE

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)

(Title)
6/22/73
(Date)

OIL CONSERVATION COMMISSION
APPROVED **JUN 28 1973**
BY 
TITLE **OIL & GAS INSPECTOR**

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 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.