	NO. OF COPIES RECEIVED										
	DISTRIBUTION			NEW MENTOO ON CONTRACT OF THE							
	SANTA FE			REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GA							
	FILE										
	U.S.G.S.										
	LAND OFFICE										
	TRANSPORTER	OIL									
		GAS		 							
	OPERATOR										
1.	PROPATION OFFICE										
	Operator										
	PENNZOIL COMPANY										
	Address										
	P.O. Draw	P.O. Drawer 1828, Midland, Texas 79702									
	Reason(s) for filing						Other (Please explain)				
	New Well	Change i	nange in Transporter of: Request for te						r testi		
	Recompletion	Oil Dry Gas Mission to run									
	Change in Ownershi	Casinghe	Casinghead Gas Condensate						Tun 23		
11.	If change of owners and address of pres	vious ow	ner	EASE							
	Lease Name		Well No. Pool Name, Including Formation			ormation		Kin	nd of Lease		
	Roosevelt	Todd, N.W. (San And			lres)	Sta	ite, Federal				
	Location										
	Unit Letter G; 1980 Feet From The North Line and 1980 Feet From T										
	Line of Section	7	Town	ship 7-	<u>S</u>	Ran	ige	35-E	, NMPi	м <u>,</u>	Roosev
H.	DESIGNATION O	DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS									
	Name of Authorized				Condensat			Address	(Give address	to wi	hich approve
	The Permian Corporation							P.O.	Drawer 1	183	. Houst
	Name of Authorized Transporter of Casinghead Gas or Dry Gas							Address	Drawer 1 (Give address	to w	hich approv

Form C-104 Supersedes Old C-104 and C-110

L	FILE					AND		Effective 1-	1-65		
	U.S.G.\$.		1-1		AUTHORIZATION TO TRAI	NSPORT OIL AND NATURAL GAS					
-	AND OFFICE										
	TRANSPORTER	OIL	+								
-		GAS	+								
. }	OPERATOR OF	FICE	+								
1.	PRORATION OFFICE Department of the control of the c										
	PENNZOIL COMPANY										
	Address										
	P.O. Drawer 1828, Midland, Texas 79702										
	Reason(s) for filing (Check proper box) Other (Please explain)										
	New Well	H			Change in Transporter of:			ing allowable			
	Recompletion	_			Oil Dry Gas	F 111.331011	to run 25	oo bbls oil f	for May, 198 φ .		
L	Change in Ownershi	hange in Ownership Casinghead Gas Condensate									
	f change of owners										
•	and address of pre-	d address of previous owner									
и.	DESCRIPTION O	ESCRIPTION OF WELL AND LEASE									
í	Lease Name										
	Roosevelt	: 7 St	tate		1 Todd, N.W. (S	State, Federal or Fee State 30-041-20529					
	Location	_						_			
- 1	Unit Letter	à	<u>, 19</u>	<u>980</u>	Feet From The North Line	and <u>1980</u>	Feet From T	he <u>East</u>			
		-			7.6	25 5		.			
i	Line of Section			Tow	mship 7-S Range	35-E , NMPN	4. Roose	velt	County		
**	DESIGNATION O	NE TEDA	NED	ΛDΤ	TER OF OIL AND NATURAL GAS	2					
XI.	Name of Authorized					Address (Give address	to which approv	ed copy of this form	is to be sent)		
	The Permi				**	P.O. Drawer 1183, Houston, Texas 77001					
	Name of Authorized	Transpo	rter of	Cas	inghead Gas or Dry Gas	Address (Give address	to which approv	ed copy of this form	is to be sent)		
	Cities Se	ervice	e 0i	1 C	٥.	P.O. Box 300,	Tulsa, Ok	klahoma 741	02		
	If well produces oil				Unit Sec. Twp. Rge.	ls gas actually connect					
	give location of tan				G 7 7-S 35-E	No					
	If this production i	s commi	ingled	l wit	h that from any other lease or pool,	give commingling orde	r number:				
	COMPLETION D				Oil Well Gas Well	New Well Workover	Deepen	Plug Back Same	Resty. Diff. Resty.		
	Designate Ty	pe of C	Compl	etio		New Well Workover	Deepen	Flug Back Same	Ties (, Lilli, Hes ()		
	Date Spudded				Date Compl. Ready to Prod.	Total Depth		P.B.T.D.			
	Date Spanded				Date Comparison, to 110-11	• • • • • • • • • • • • • • • • • • • •					
	Elevations (DF, RK	(B, RT, C	GR. etc		Name of Producing Formation	Top Oil/Gas Pay		Tubing Depth			
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		,	,							
	Perforations							Depth Casing Shoe			
					TUBING, CASING, AND	BING, CASING, AND CEMENTING RECORD					
	HOLE SIZE				CASING & TUBING SIZE	DEPTHS	ET	SACKS CEMENT			
					OD ALLOWARD E. Company	ter recovery of total vol	of load oil	and must be equal to	or exceed top allow-		
V.	TEST DATA AN	D REQ	UES	rru	OR ALLOWABLE (Test must be af able for this de	pth or be for full 24 how	e)	and must be equal to	or exceed top attour		
	Date First New Oil Run To Tanks				Date of Test	Producing Method (Flo	w, pump, gas lij	ft, etc.)	t, etc.)		
	Length of Test	Length of Test			Tubing Pressure	Casing Pressure		Choke Size			
								Gae - MCF			
	Actual Prod. Durin	g Test			Oil-Bbls.	Water-Bbls.		Gde-MCF			
		_									
	GAS WELL Actual Prod. Test-MCF/D				Length of Test	Bbls. Condensate/MMC	CF	Gravity of Condensate			
	Actual Float 1001	- 10.01 7 2									
	Testing Method (p	Testing Method (pitot, back pr.)			Tubing Pressure (Shut-in)	Casing Pressure (Shu	t-in)	Choke Size			
		·									
VI.	CERTIFICATE OF COMPLIANCE					OIL	CONSERVA	TION COMMISS	SION		
• • •	CENTAL IONED OF COMEDIANCE						NO71>	, 1980			
	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.					APPROVED		/			
						By Jan a Minister					
						Coologis					
						TITLE	1.45010.3	(*************************************			
						This form is	to be filed in	compliance with R	ULE 1104.		
	(Signature)					To this is a request for allowable for a newly drilled or deepened					
	(Signature)					well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.					
	District Production Manager					All sections of this form must be filled out completely for allow-					
	(Title)					able on new and recompleted wells.					
	May 12,	May 12, 1980					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.				
				U	ate)	Separate For	Separate Forms C-104 must be filed for each pool in multiply				
						completed wells.					