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STATE OF NEW MEXICO GY AND MINERALS DEPARTMENT PUST NIMUTION		ATION DIVISION OX 2088	Form C-104 Revised 10-1-78
SANTA FE FILE U.S.O.S. LAND OFFICE OFFICE OIL GAS OPERATOR	REQUEST FO	W MEXICO 87501 DR ALLOWABLE AND SPORT OIL AND NATURAL GAS	•
PADAATION OFFICE		PORT UIL AND NATURAL GAS	
Address 904 Highton	wer Bldg., Oklahoma C		
Reason(s) for filing (Check proper box New Well Recompletion Change in Ownership	*) Change in Transporter of: Oil Dry G	Other (Please explain) Request Test	Allowable of f oil. Bough "B"
change of ownership give name nd address of previous owner			
ESCRIPTION OF WELL AND	LEASE Well No. Pool Name, Including F		
ocation	North	660 Feet Free	lloot
10	30 Feel From The <u>North</u> Lii wnahip 85 Range		The West osevelt county
ESIGNATION OF TRANSPOR Same of Authorized Transporter of Oil Phillips Petroleum		As Address (Give address to which appro Box 791, Midland, T	
ame of Authorized Transporter of Ca		Address (Give address to which appro	
well produces oil or liquids, we location of tanks.	Unit Sec. Twp. Rge. F 19 8S 34E	Is gas actually connected? Wh NO	en
this production is commingled winter the second s	th that from any other lease or pool,	give commingling order number:	
Designate Type of Completio	on - (X)	New Well Workover Deepen	Plug Back Same Restv. Dill. Restv.
ne Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
syntions (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
rforations	<u> </u>	J	Depth Casing Shoe
	TUBING, CASING, AND	CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
		·····	
ST DATA AND REQUEST F(L WELL Is First New Oil Run To Tanks	DR ALLOWABLE (Test must be a) able for this de	(ter recovery of total volume of load oil pth or be for full 24 hours) Producing Method (Flow, pump, gas lij	and must be equal to or exceed top allow (t, etc.)
ngth of Test	Tubing Pressure	Casing Pressure	Choke Size
tual Prod. During Teet	Oll-Bbis.	Water-Bbis.	Gas - MCF
IS WELL			
tual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
eting Method (pirot, back pr.)	Tubing Pressure (Shat-is)	Casing Pressue (Shut-ia)	Choke Size
RTIFICATE OF COMPLIANC	E		ION DIVISION 1982
ision have been complied with ve is true and complete to the	rgulations of the Oil Conservation and that the information given best of my knowledge and belief.	APPROVED <u>Mini</u> By <u>Orig. Signed by</u> Let Clements	
Allange		TITLE <u><u>Gil & Gas Insp.</u></u> This form is to be filed in c If this is a request for allow well, this form must be accompar tests taken on the well in accom	able for a newly drilled or despended nied by a tabulation of the deviation dence with RULE 111.
Production Man. (Tu) March 30, 1982	•)	All sections of this form mut able on new and recompleted we Fill out only Sections 1, 11, woll sections 2, 11,	t be filled out completely for slow- lis. III, and VI for changes of owner, if, or other such change of condition.
(Der	•;	t wall same or sumber of transport	is, or other such change of condition. be filed for each pool in multiply

RECEIVED

APR 1 1982

O.C.S. Hobes office