NO. OF COPIES RECEIVED						
DISTRIBUTION	NEW MEXICO OIL C	NEW MEXICO OIL CONSERVATION COMMISSION Form C-104				
SANTA FE		REQUEST FOR ALLOWABLE				
FILE	,	REQUEST FOR ALLOWABLE  AND  Supersedes Old C-104 and C  Effective 1-1-65				
U.S.G.S.	AUTHORIZATION TO TRA	ANSPORT OIL AND NATURAL	GAS			
LAND OFFICE	, and the state of the		0.10			
I RANSPORTER OIL						
GAS			·			
OPERATOR						
PRORATION OFFICE						
Operator						
Shell Oil Con	npany					
P. O. Box 18	58, Roswell, New Mexico	Other (Please explain)				
tiew Well						
Recompletion	Change in Transporter of: Oil Dry Go	Te				
Change in Ownership	Casinghead Gas X Conde					
	- Indeed	insure				
If change of ownership give name and address of previous owner	3					
. DESCRIPTION OF WELL AN		me, Including Formation	Kind of Lease			
			State Federal on For			
Levick-State	2 T	obac-Pennsylvanian	State State			
Location						
Unit Letter <b>G</b> ;	1980 Feet From The north Lin	ne and <b>1980</b> Feet From	n The <b>east</b>			
Line of Section 20 ,	Township <b>8-S</b> Range	33-E , NMPM, Chav	<b>es</b> County			
	ORTER OF OIL AND NATURAL GA					
Name of Authorized Transporter of	Oil 📉 or Condensate 🗍	Address (Give address to which appr	roved copy of this form is to be sent)			
Magnolia Pipa	Line Co.	Box 1073, Midland,	Texas			
Magnolia Pipe Name of Authorized Transporter of	Casinghead Gas 🔀 💮 or Dry Gas 🦳	Address (Give address to which app	roved copy of this form is to be sent)			
Capitan, Inc.		3707 Rewlins Ave.,	Dallas Teyes			
	Unit Sec. Twp. Rge.	Is gas actually connected?				
I It well produces oil or liquids.	Unit Sec. Twp. Rge.	is gas actually connected:	<i>l</i> hen			
If well produces oil or liquids, give location of tanks.			/hen 2-1-65			
give location of tanks.	H 20 8-S 33-E	Yes				
give location of tanks.  If this production is commingled		Yes				
give location of tanks.  If this production is commingled COMPLETION DATA	with that from any other lease or pool,  Oil Well Gas Well	Yes	2-1-65			
give location of tanks.  If this production is commingled	with that from any other lease or pool,  Oil Well Gas Well	Yes give commingling order number:	2-1-65			
give location of tanks.  If this production is commingled COMPLETION DATA	with that from any other lease or pool,  Oil Well Gas Well	Yes give commingling order number:	2-1-65			
give location of tanks.  If this production is commingled. COMPLETION DATA  Designate Type of Comple	with that from any other lease or pool, $\begin{array}{c ccccccccccccccccccccccccccccccccccc$	give commingling order number:  New Well Workover Deepen	Plug Back   Same Res'v.   Diff. Res'v			
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give location of tanks.  If this production is commingled. COMPLETION DATA  Designate Type of Comple Date Spudded Fool	with that from any other lease or pool,  etion — (X)  Date Compl. Ready to Prod.	give commingling order number:  New Well Workover Deepen  Total Depth	Plug Back   Same Res'v.   Diff. Res'v.   P.B.T.D.			
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give location of tanks.  If this production is commingled. COMPLETION DATA  Designate Type of Comple Date Spudded  Pool  Perforations	with that from any other lease or pool,  etion — (X)  Date Compl. Ready to Prod.  Name of Producing Formation  TUBING, CASING, AN	give commingling order number:  New Well Workover Deepen  Total Depth  Top Oil/Gas Pay  D CEMENTING RECORD	Plug Back Same Res'v. Diff. Res'v  P.B.T.D.  Tubing Depth  Depth Casing Shoe			
give location of tanks.  If this production is commingled. COMPLETION DATA  Designate Type of Comple Date Spudded Fool	with that from any other lease or pool,  etion — (X)    Date Compl. Ready to Prod.    Name of Producing Formation	give commingling order number:  New Well Workover Deepen  Total Depth  Top Oil/Gas Pay	Plug Back   Same Res'v.   Diff. Res'v   P.B.T.D.   Tubing Depth			
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give location of tanks.  If this production is commingled COMPLETION DATA  Designate Type of Comple Date Spudded  Pool  Hole Size  TEST DATA AND REQUEST OIL WELL	with that from any other lease or pool,  etion — (X)  Date Compl. Ready to Prod.  Name of Producing Formation  TUBING, CASING, AN  CASING & TUBING SIZE  FOR ALLOWABLE  (Test must be able for this december)	give commingling order number:  New Well Workover Deepen  Total Depth  Top Oil/Gas Pay  DEPTH SET  after recovery of total volume of load of epth or be for full 24 hours)	Plug Back   Same Res'v.   Diff. Res'v			
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give location of tanks.  If this production is commingled. COMPLETION DATA  Designate Type of Complete Date Spudded  Pool  Perforations  HOLE SIZE  TEST DATA AND REQUEST OIL WELL  Date First New Oil Run To Tanks  Length of Test  Actual Prod. During Test  GAS WELL  Actual Prod. Test-MCF/D	with that from any other lease or pool,  Petion — (X)  Date Compl. Ready to Prod.  Name of Producing Formation  TUBING, CASING, AN  CASING & TUBING SIZE  FOR ALLOWABLE (Test must be a able for this d  Date of Test  Tubing Pressure  Oil-Bbls.  Length of Test	give commingling order number:  New Well Workover Deepen  Total Depth  Top Oil/Gas Pay  DEPTH SET  DEPTH SET  Infter recovery of total volume of load of epth or be for full 24 hours)  Producing Method (Flow, pump, gas)  Casing Pressure  Water-Bbls.  Bbls. Condensate/MMCF	Plug Back Same Res'v. Diff. Res'v.  P.B.T.D.  Tubing Depth  Depth Casing Shoe  SACKS CEMENT  il and must be equal to or exceed top allow  lift, etc.)  Choke Size  Gas-MCF			
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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.

Division Production Superintendent (Tule)

# 8. B. Des1

Original Signed By

S. B. Deal

February 16, 1965

APPROVED_		 . 19
<b>P</b> 4	 	 
TITLE	 	 

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 Sections I, II, III, and VI only 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.