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FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
INANSPORTER	GAS		
OPERATOR			

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ffective 1-1-65		
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	DISTRIBUTION SANTA FE		ONSERVATION COMMISSION FOR ALLOWABLE	Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65						
ļ	FILE		AND							
	U.S.G.S.	AUTHORIZATION TO TRA	NSPORT OIL AND NATURAL G	SAS '						
	LAND OFFICE									
	TRANSPORTER OIL									
	GAS									
	OPERATOR									
I.	PRORATION OFFICE Operator									
	Champlin Petroleum Comp	any								
		dland, Texas 79701								
	300 Wilco Building Mi Reason(s) for filing (Check proper box)	diand, lexas ///or	Other (Please explain)							
	New We!l	Change in Transporter of:								
	Recompletion	Oil Dry Gas	s 🔲							
	Change in Ownership	Casinghead Gas Conden	nsate							
	If change of ownership give name									
	and address of previous owner									
II.	DESCRIPTION OF WELL AND L	EASE	ormation Kind of Leas	e Lease No.						
	Lease Name	Well No. Pool Name, Including Fo	State Federa							
	State 5-8-33	3 Chaveroo-San	Andres	State K-3351						
	Location		660	West						
	Unit Letter L : 198	O Feet From The South Lin	e and 660 Feet From	The West						
	_	. 9 C Barre	33-E , NMPM, (Chaves County						
	Line of Section 5 Town	nship 8-S Range	22-E 'MMEN'	Silaves						
	DESIGNATION OF TRANSPORT	ED OF OIL AND NATURAL GA	AS							
111.	Name of Authorized Transporter of Oil	X or Condensate	Address (Give address to which appro	ved copy of this form is to be sent)						
	Mobil Pipe Line Company		Box 900 Dallas, Texas	s 75221						
	Name of Authorized Transporter of Cast	nghead Gas X or Dry Gas	Address (Give address to which appro	oved copy of this form is to be sent)						
	Cities Service Oil Comp		Bartlesville, Oklahoma							
		Unit Sec. Twp. Rge.		nen						
	If well produces oil or liquids, give location of tanks.	G 5 8-S 33-E_	Yes	10-12-76						
	If this production is commingled with		give commingling order number:							
13/	If this production is commingled with COMPLETION DATA	i that from any other lease of poor,								
IV.		Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.						
	Designate Type of Completion	n - (X)	X .							
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.						
	9-21-76	10-12-76	4515	4469						
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth						
	4445 GR	San Andres	4235	4229 Depth Casing Shoe						
	Perforations			•						
	4235-4338			4514						
			D CEMENTING RECORD	SACKS CEMENT						
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	850						
	12½" @1369, 11" @ 1920	8-5/8"	1920	300						
	7-7/8"	4-1/2"	4515 4229							
	4-1/2" csg.	2-3/8"	4229							
				l and must be equal to or exceed top allow						
V	. TEST DATA AND REQUEST FO	OR ALLOWABLE (Test must be a able for this d	after recovery of total volume of load of epth or be for full 24 hours)	t and must be equal to 5, exceed top deter						
	OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas	lift, etc.)						
	1	10-24-76	Pump.							
	10-13-76 Length of Test	Tubing Pressure	Casing Pressure	Choke Size						
	1	65	65							
	24 hours Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF						
		40	190	39						
	GAS WELL									
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate						
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size						
VI	CERTIFICATE OF COMPLIAN	CE	? I	ATION COMMISSION						
VI. CERTIFICATE OF COMP 2111.			APPROVED NOV 1	19/						
	I hereby certify that the rules and	hereby certify that the rules and regulations of the Oil Conservation		APPROVED 19						
Commission have been complied with and that the information above is true and complete to the best of my knowledge				Lighton						
	above is true and complete to the	, best of my knowledge and seem	SILDERNY							
Martin Misighature) District Clerk (Title)		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 allow able on new and recompleted wells.								
					October 28, 1976			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		
							ate)	well name or number, or transport	ust be filed for each pool in multiple	
								Separate Forms C-104 mi		
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RICEIVED

OCT 29 1976

OIL CONSERVATION COMM. HOBBS, N. M.