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•	SANTA FE				
	FILE				
	U.S.G.S.				
	LAND OFFICE				
	TRANSPORTER	OIL			
		GAS			
	OPERATOR				
1.	PRORATION OFFICE				
	Operator				

NEW MEXICO OIL CONSERVATION COMMIS. JN

Form C-104

	FILE	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-110 Effective 1-1-65			
	U.S.G.S.	AUTUODIZATION TO TO	AND				
	LAND OFFICE	AUTHORIZATION TO TRA	INSPORT OIL AND NATURA	AL GAS			
	OIL						
	TRANSPORTER GAS						
	OPERATOR						
1.	PRORATION OFFICE						
	MWJ Producing Company						
	Address						
	1804 First National Ba	nk Building, Midland, Te	exas 79701				
	New Well X	Change in Transporter of:	Other (Please explain)	an the impor nor be			
	Recompletion	Oil Dry Ga		2/1/29			
	Change in Ownership	Casinghead Gas Conden	≓ 1				
	, , , , , , , , , , , , , , , , , , ,			9.4.1.			
	If change of ownership give name and address of previous owner	THIS WELL HAS BEEN FO Distribution on the second					
	and address of previous owner	NOTIFY THIS OFFICE.					
II.	DESCRIPTION OF WELL AND						
	Lease Name	Well No. Pool Name, Including Fe	^ I				
	State-32	1 Tom Tom (San A	Indres) (-5911 State, X	XXXXXXXX State K-3754			
	Location						
	Unit Letter H; 1980	Feet From The North Lin	e and 660 Feet 7	From The East			
	Line of Section 32 Tou	7 5 21	T o				
	Line of Section JZ Tow	mship 7-S Range 31	Е , имрм, С	haves County			
			_				
III.	DESIGNATION OF TRANSPORT Name of Authorized Transporter of Oil			approved copy of this form is to be sent)			
	The Permian Corporation	or contampate	Box 1183, Houston,				
	Name of Authorized Transporter of Cas	inghead Gas X or Dry Gas		approved copy of this form is to be sent)			
	Unknown at this time.						
	76	Unit Sec. Twp. Rge.	Is gas actually connected?	When			
	If well produces oil or liquids, give location of tanks.	H 32 7-S 31-E	No	1			
	If this production is commingled wit	h that from any other lease or pool	give commingling order number				
IV.	If this production is commingled wit COMPLETION DATA	n that from any other lease or poor,	give comminging order number				
		Oil Well Gas Well	New Well Workover Deeps	Plug Back Same Res'v. Diff. Res'v.			
	Designate Type of Completio	$\mathbf{n} - (\mathbf{X})$ \mathbf{X}	X				
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.			
	11/21/78	1/1/79	4010'	3970'			
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth			
	4283 Gr.	San Andres	3775	3909'			
	Perforations 3775-3853			Depth Casing Shoe			
				4003			
	VOL 5 5175	T	CEMENTING RECORD	SACKS CEMENT			
	12 1/4"	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT			
		8 5/8" 4 1/2"	1363' 4005'	625 sacks 200 sacks			
	7_7/8"	2 3/8"	3909'	0			
		2 3/0	3,0,0				
v	TEST DATA AND REQUEST FO	OP ALLOWARIE /Test must be a	fter encourse of total volume of los	d oil and must be equal to or exceed top allow-			
٧.	OIL WELL	able for this de	pth or be for full 24 hours)	a on and wast of educito or excess tob attom-			
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump,				
	1/1/79	1/1/79	Pump-2" X 1 1/2" X 3	12'			
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size			
	24 hrs.						
	Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF TSTM			
	66		11	1514			
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate			
	Actual Prod. 1est-MCF/D	Length of lest	Bbis. Condensate/MMCF	Gravity of Condensate			
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size			
	resting Method (pitot, back pr.)	Turny Freesan (Shut-In)	Cosmo Francisco (Since 12)	Chore size			
				DV4 TION COMMISSION			
VI.	CERTIFICATE OF COMPLIANCE	CE	OIL CONSERVATION COMMISSION APPROVED APPROVED 19 19 19 19				
	I hereby certify that the rules and r Commission have been complied w	regulations of the Oil Conservation with and that the information given					
	above is true and complete to the	best of my knowledge and belief.	BY STAN SALON				
			TITION	DISTRICT			
	r a		No. Dollar Charles				
	(4/) 12200		This form is to be filed in compliance with RULE 1104.				
(Signature)			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				
-		iture)	tests taken on the well in accordance with RULE 111.				
	Agent (Title)		All sections of this form must be filled out completely for allow-				
	,	****/	able on new and recomplet	ed wells.			
	1/2/79		Fill out only Sections	I. II. III, and VI for changes of owner,			

(Date)

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.



DRILLING CO., INC .- OIL WELL DRILLING CONTRACTORS

P. O. Box 2055

ROSWELL, NEW MEXICO 88201 TELEPHONES: ARTESIA 505/746-6757 ROSWELL 505/623-5070

10, 30, 1978 The West

November 29, 1978

M.W.J. Producing Co. 413 First National Bank Bldg. Midland, Texas 79701

Re: State 32 #1

Gentlemen:

The following is a Deviation Survey of the above well located in Chaves County, New Mexico.

4961	_	1/2 ⁰
990'	-	3/4°
1372'	_	3/4°
1740'	_	1
1891'	-	10
23851	-	1 1/4 ⁰

2852' - 1°

Yours very truly,

WEK DRILLING CO., INC.

Arnold Newkirk

STATE OF NEW MEXICO) COUNTY OF CHAVES)

The foregoing was acknowledged before me this 29th day

November, 1978 by Arnold Newkirk.

ommission Expires:

Notary Public

My Commission Expires: