1.	NO. OF COMITY RECEIVED DISTRIBUTION SANTA FE FILE U.S.G.S. LAND OFFICE I RANSPORTER OPEF:/ TOR PROFATION OFFICE Operator	AUTHORIZATION TO TRAN	INSERVATION CON SSION OR ALLOWABLE AND ISPORT OIL AND NATURAL G	Form C - 104 Supersedes Old C-104 and C+130 Effoctivo 1-1-65 45	
	Western Reserves Oil Company				
	Address P. O. Box 993, Midland, TX 79702				
	Reason(s) for filing (Check proper box) New We!l X Recompletion Change in Cwnership	Change in Transporter of: Cii Dry Gas Casinghead Gas S Condens	E I		
	If change of ownership give name and address of previous owner				
IL DESCRIPTION OF WELL AND LEASE					
11.	Lease Name Western	Well No. Pool Name, Including Po	State Federal		
	Holly '32' State	2 Tom-Tom (Sa	n Andres) [date, etal.	<u>State L-5119</u>	
		OFeet From TheNorth_Line	and <u>1650</u> Feet From T	heEast	
		7.0			
	Line of Section 32 Town	nshtp 7S Range	31E , NMPM, Chay	<u>/</u>	
Ш.	DESIGNATION OF TRANSPORT	ER OF OIL AND NATURAL GA	S Address (Give address to which approv	ed copy of this form is to be sent)	
	Name of Authorized Transporter of Oil Navajo Refining Com	<u> </u>	Box 159. Artesia, NN	1 88240	
	Name of Authorized Transporter of Cast	Inghead Gas 🔀 or Dry Gas 📑	Address (Give address to which approv		
	Cities Service Comp	any Unit Sec. Twp. Pge.	Box 300, Tulsa, OK Is gas actually connected? Whe	74102	
	If well produces oil or liquids, give location of tanks.	G 32 7S 31E		9/5/80	
	If this production is commingled with that from any other lease or pool, give commingling order number:				
IV	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v	
	Designate Type of Completio	1 <u>t</u>	Total Depth	P.B.T.D.	
	Date Spudded 8/4/80	Date Compl. Ready to Prog. 9/6/80	4010'	3968'	
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oll/Gas Pay	Tubing Depth	
	4286' GR	San Andres	3762'	<u>3966</u> Depth Casing Shoe	
	Perforations 3762-70' (9); 3779-81' (3); 3790-94' (5); 3799- Depth Casing Show 3801' (3); 3806-12' (7); 3830-32' (3) 4010'				
		TUBING, CASING, AND	D CEMENTING RECORD	SACKS CEMENT	
	HOLE SIZE	CASING & TUBING SIZE	1355	650 sx	
	7 7/8"	4 1/2"	4010'	300 sx	
	4 1/2"	2 3/8"	3966'		
v	TEST DATA AND REQUEST FO	EST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allo			
·	OIL WELL Date First New Oil Run To Tanks	able for this de	epth or be for full 24 hours) Producing Method (Flow, pump, gas li	ifi, esc.)	
	Date First New Oil Run 16 Junks 9/8/80	9/13/80	Pump		
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
	24 hrs Actual Pred. During Test	Oil-Bbis.	Water-Bbls.	Gas - MCF	
	60 bbls	60	00	45	
	GAS WELL Actual Frod. Test-MCF/D	Length of Test	Bble. Condensate/MMCF	Gravity of Condensate	
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
	reality wanted (proof and proof				
v	I. CERTIFICATE OF COMPLIAN	CE	OIL CONSERV	ATION COMMISSION	
	I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above in true and complete to the best of my knowledge and belief.		APPROVED		
	Very I	anklin	If this is a request for allowable for a newly drilled or deeper is the form must be accommanied by a tabulation of the deviat		
	(Signature)		well, this form must be accordance with RULE 111. tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for alle		
	(T	itle)	All sections of this form high be intered with the sections of this form high be. shie on now and recompleted wells. Fill out only Sections I. II. III, and VI for changes of own well name or number, or transporter, or other such change of conditi Separate Forms C-104 must be filed for each pool in multi completed wells.		
	9/15/80	lute)			
	U)	un 7			

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