AMISS

Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65

NATURAL GAS

DISTRIBUTION		 'EW MEXICO OIL CONSERVATION				
SANTA FE		REQUEST FOR ALLOWABLE				
FILE		AND				
u.s.g.s.		AUTHORIZATION TO TRANSPORT OIL AND				
LAND OFFICE						
TRANSPORTER	OIL					
	GAS					
OPERATOR						

LAND OFFICE	<u> </u>				
TRANSPORTER OIL GAS					
OPERATOR	1				
PRORATION OFFICE					
Operator Flag-Redfern Oil Com	pany		·		
Address P.O. Box 11050					
Reason(s) for filing (Check proper box	Midland, Texas 79702	Other (Please	explain)		
New Well	Change in Transporter of:	, , , , , , , , , , , , , , , , , , , ,	,	· •	
Recompletion	Oil X Dry Go	rs 🔲			
Change in Ownership	Casinghead Gas Conder	nsate			
if change of ownership give name and address of previous owner					
DESCRIPTION OF WELL AND	LEASE Well No. Pool Name, Including F	ormation	Kind of Lease		
Nuchols "24"	2 Tom-Tom (San	Lease .45.			
Unit Letter N; 6	60 Feet From The South Lin	e and <u>1980</u>	Feet From T	The West	
Line of Section 24 To	waship 7S Range	31E , NMPM	. Ch	aves	County
	TER OF OIL AND NATURAL GA				
Name of Authorized Transporter of Oil Lantern Petroleum Comp.		Address (Give address to which approved copy of this form is to be sent) P.O. Box 2281 Midland, TX 79702			
Name of Authorized Transporter of Car	_	P.O. Box 2281 Midland, TX 79702 Address (Give address to which approved copy of this form is to be sent)			
Cities Service Company		P.O. Box 300 Tulsa, OK 74102			
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. P.ge. M 24 7S 31E	Is gas actually connecte	ed? Whe		
If this production is commingled with COMPLETION DATA	th that from any other lease or pool,	yes give commingling order	. unwper:	11/82	
	Oll Well Gas Well	New Well Workover	Deepen	Plug Back Same Res	v. Diff. Res'v.
Designate Type of Completic		1		; ;	1
Date Spudded	Date Compl. Ready to Prod.	Tatal Depth		F.B.T.D.	
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay		Tubing Depth	
Perforations		1		Depth Casing Shoe	
	THOMAS CASING AND	CEUENZING DEGOD			
HOLE SIZE	TUBING, CASING, AND CASING & TUBING SIZE	DEPTH SE		SACKECEN	= 117
11022 0.22	0.10.11.0 0.12.0	52.71.52,		SACKS CEMENT	
	-				
		<u>j</u>	·	İ	
TEST DATA AND REQUEST FOOL, WELL	OR ALLOWABLE (Test must be a) able for this de	fter recovery of total volu. pth or be for full 24 hours	ne of load oil a }	and must be equal to or es	ceed top allow-
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)			
Length of Test	Tubing Pressure	Casing Pressure		Choke Size	
Actual Prod. During Test	O(1-Bbis.	Water - Bbls.		Gas-MCF	
-		<u> </u>			
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	
CERTIFICATE OF COMPLIAN	CE	OIL CONSERVATION COMMISSION APPROVED JAN 3 0 1985			
I hereby certify that the rules and r Commission have been complied w					19
above is true and complete to the		BYEddie W. Seay			
		TITLE Oil & Gas Inspector			
Judy toe	rton	This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or despend			
(Signi	iture)	well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.			
Senior Proration A		All sections of this form must be filled out completely for allow-			
1-25-85	(e)	able on new and recompleted walls.			
	(e)	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.			
·				be filed for each poo	

RECEIVED

JAN 28 1985

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