

STATE OF NEW MEXICO

ENERGY ALD MINERALS DEPARTMENT OIL CONSERVATION DIVISION

HOBBS DISTRICT OFFICE

8-1-86

POST CEPTOR BOX 1340 POSES OF XBM WEST BEBOYD SEC 363-6151

	607 X - 37.2
OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501	
PE: Proposed: MC CHC NSL NSP SWD WFX PMX	
Gentlemen:	
I have examined the application for the: The state of	Unit S-T-R 2 13 38
5 J 5	
Yours very truly,	
Jerry Sexton Supervisor, District 1	
/mc	

TAMARACK PETROLEUM COMPANY, INC.

1485 ONE FIRST CITY CENTER MIDLAND TEXAS 79701

TELEPHONE: 683-5474

Julv 29, 1986

State of New Mexico Energy and Minerals Department Oil Conservation Division P. O. Box 2088 Santa Fe, New Mexico 87501 Attention: Mr. R. L. Stamets - Director

> RE: Application to Expand Waterflood in the Bronco Wolfcamp Pool Lea County, New Mexico

Dear Sir:

Enclosed is our Application to Convert The Bronco Wolfcamp Unit No. 7 Producing Well to Water Injection. Tamarack Petroleum Co., Inc. requests this application be approved administratively. All the required application information is attached to the original and copy, the duplicate is mailed to the district office in Hobbs. Should additional information or other request be necessary, please contact me at the above address.

Very truly yours,

Randy A. McClay Engineering Manager

cc: Hobbs District

Attention: Jerry Sexton



ı	
#BBC.	CATION FOR AUTHORIZATION TO INJUST
. 1	Purpose: Secondary Recovery Pressure Maintenance Disposal Storage
II.	Operator: Tamarack Petroleum Co., Inc.
	Address: 500 W. Texas, Suite 1485; Midland, TX 79702
•	Contact party: Randy A. McClay Phone: 915-683-5474
III.	well data: Complete the data required on the reverse side of this form for each well proposed for injection. Additional sheets may be attached if proposed.
IV.	If yes, give the Division order number authorizing the project R-4529 & R4528
٧.	Attach a map that identifies all wells and leases within two miles of any proposed injection well with a one-half mile radius circle drawn around each proposed injection well. This circle identifies the well's area of review.
VI.	Attach a tabulation of data on all wells of public record within the area of review which penetrate the proposed injection zone. Such data shall include a description of each well's type, construction, date drilled, location, depth, record of completion, and a schematic of any plugged well illustrating all plugging detail.
VII.	retain data on the proposed operation, including: SEE ATTACHED
	Proposed average and maximum daily rate and volume of fluids to be injected; Whether the system is open or closed; Proposed average and maximum injection pressure; Sources and an appropriate analysis of injection fluid and compatibility with the receiving formation if other than reinjected produced water; and at or within one mile of the purposes into a zone not productive of cit and at or within one mile of the purposes into a zone not productive of cit and at or within one mile of the purposes into a zone not productive of cit and at or within one mile of the purposes into a zone not productive of cit and at or within one mile of the purposes into a zone not productive of cit and at or within one mile of the purposes into a zone not productive of cit and at or within one mile of the purposes into a zone not productive of cit and at or within one mile of the purposes into a zone not productive of cit and at or within the purposes into a zone not productive of cit and at or within the purposes into a zone not productive of cit and at or within the purposes into a zone not productive of cit and at or within the purposes into a zone not productive of cit and at or within the purposes into a zone not productive of cit and at or within the purposes into a zone not productive of cit and at or within the purposes into a zone not productive of cit and at or within the purposes into a zone not productive of cit and at or within the purposes into a zone not productive of cit and at or within the purposes into a zone not productive of cit and at or within the purposes into a zone not productive of cit and at or within the purposes in the cit and at or within the purposes in the cit and at or within the purposes in the cit and at or within the purposes in the cit and at or within the purposes in the cit and at or within the purposes in the cit and at or within the purposes in the cit and at or within the purposes in the cit and at or within the
'III.	the disposal zone formation water (may be measured or inferred from existing literature, studies, nearby wells, etc.). Attach appropriate geological data on the injection zone including appropriate lithologic detail, geological name, thickness, and depth. Give the geologic name, and depth to bottom of all underground sources of drinking water (aquifers containing waters with injection zone as well as any such source known to be immediately underlying the proposed injection interval. SEE ATTACHED
IX.	Describe the proposed stimulation program, if any. SEE ATTACHED
х.	Attach appropriate logging and test data on the well. (If well logs have been filed with the Division they need not be resubmitted.) SEE ATTACHED
XI.	Attach a chemical analysis of fresh water from two or more fresh water wells (if available and producing) within one mile of any injection or disposal well showing location of wells and dates samples were taken. SEE ATTACHED
III.	Applicants for disposal wells must make an affirmative statement that they have examined available geologic and engineering data and find no evidence of open faults or any other hydrologic connection between the disposal zone and any underground source of drinking water. SEE ATTACHED
II.	Applicants must complete the "Proof of Notice" section on the reverse side of this form.
IV.	
	I hereby certify that the information submitted with this application is true and correct to the best of my knowledge and belief. Name: Randy A McClay
	Signature: Fittle Engineering Manager
If the	information - Date: July , 1986
	information required under Sections VI, VIII, X, and XI above has been previously ted, it need not be duplicated and resubmitted. Please show the date and circumstance earlier submittal. Application for Waterflood Hearing VMOCC May 9, 1973
)ISTRI	Case No. 4960 Order No. R-4529 & Application for Unitization Hearing Order No. R-4529

- and will as east we supposited for each injection well covered by this application. The data must be both in tabular and schematic form and shall include:
 - (1) Lease name; Well No.; location by Section, Township, and Range; and footage
 - (2) Each cooling string used with its size, setting depth, sacks of cement used, hole size, top of cement, and how such top was determined.
 - A description of the tubing to be used including its size, lining material, and
 - The name, model, and setting depth of the packer used or a description of any other (4)

Division District offices have supplies of Well Data Sheets which may be used or which may be used as models for this purpose. Applicants for several identical wells may submit a "typical data sheet" rather than submitting the data for each well.

- The following must be submitted for each injection well covered by this application. All items must be addressed for the initial well. Responses for additional wells need be shown only when different. Information shown on schematics need not be repeated.
 - (1) The name of the injection formation and, if applicable, the field or pool name.
 - (2) The injection interval and whether it is perforated or open-hole.
 - State if the well was drilled for injection or, if not, the original purpose of the well.
 - Give the depths of any other perforated intervals and detail on the sacks of cement or bridge plugs used to seal off such perforations.
 - (5) Give the depth to and name of the next higher and next lower oil or gas zone in the

IIV. PROOF OF NOTICE

All applicants must furnish proof that a copy of the application has been furnished, by certified or registered mail, to the owner of the surface of the land on which the well is to be located and to each leasehold operator within one-half mile of the well location.

Where an application is subject to administrative approval, a proof of publication must be submitted. Such proof shall consist of a copy of the legal advertisement which was published in the county in which the well is located. The contents of such advertisement must include:

- (1) The name, address, phone number, and contact party for the applicant;
- the intended purpose of the injection well; with the exact location of single wells or the section, township, and range location of multiple wells:
- the formation name and depth with expected maximum injection rates and pressures; and (3)
- a notation that interested parties must file objections or requests for hearing with (4) the Oil Conservation Division, P. O. Box 2088, Santa Fe, New Mexico 87501 within 15

NO ACTION WILL BE TAKEN ON THE APPLICATION UNTIL PROPER PROOF OF NOTICE HAS BEEN

Surface owners or offset operators must file any objections or requests for hearing TICE: of administrative applications within 15 days from the date this application was

Hollis W. Harris 1110 Clyde Amarillo, TX 79106

Bronco Wolfcamp Unit	J-2-13S-38E Ton townsiip range	Tabular Data		8 Cemented with 260 Bx.	e feet determined by Circulation	Casing 8 5/8" " Cemented with 250 ax.	temperature	11		" Cemented with 370 ax.	8100 Feet determined by Temperature	7 7/8	9700	erval	9068 feet to allow
Tamarack Petroleum Co., Inc.	7 2110' FSL & 1813' FWL J-2-WILL NO. FOOTAGE LOCATION SECTION	Schematic	Surface Casing	51ze 13 3/8	3/8 48# 10C Surface the 260 sks cmt	78" 24# & 32# (4572' Intermediate Casing sks CMT 58 SMT)	TOC 8100'(temp) 0C	PBID 9154 Hole Bize	Perf 9438-46 Long atrihu	" 15.5# & 17# PB 9642 5128 5172	370 sks CMT TD 9700 10C 8.	Holb size	Total depth	Injection interval	8906

Ĭ	Tubing size 2 7/8 & 2 3/8" lined with TK-75 Plastic set in (material)
j -	Baker Lockset (brend and model)
10)	(or describe any other casing-tubing seal),
011	Other Date
-	Name of the injection formation Wolfcamp
2.	Name of Field or Pool (if applicable) Bronco Wolfcamp
3.	Is this a new well drilled for injection? $\overline{//}$ Yea $\overline{//}$ No
	If no, for what purpose was the well originally drilled? Production
	= =
	squeezed with 32 sks through DC squeeze tool at 9397. FB 9395. Feriorated 9200-25 squeezed with 68 sks throu,h "DC" squeeze tool at 9157 PB 9154".
5.	Give the depth to and name of any overlying and/or underlying oil or gas zones (pools) this area. Devonian 11,800

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VI	my D D	CONSTRUCTION	DATE	
WELL	TYPE	CSG DEPTH	COMPLETED	LOCATION
Tamarack	Petroleum (Company, Inc.		
BWCU #4	INJ	5½ @ 11,874	6/24/63	B-2-13S-38E
BWCU #9	PROD	5½ @ 9183	11/15/80	A-2-13S-38E
BWCU #6	PROD	5½ @ 9143	8/20/62	G-2-13S-38E
Tenneco Harris #	PROD 1	- 5½ @ 9216	2/1/83	1-2-13S-38E
BWCU #7	PROPOSEI	O INJ.5½ @ 9700	4/27/62	J-2-13S-38E
BWCU #8	INJ	5½ @ 9142	7/6/62	K-2-13S-38E
Texas Oil	& Gas			
Brownfield	d#1 PROD	4½ @ 9670	6/5/85	Sec. 358, Blk D, Gibson
Brownfield	d#2 P&A PH	ROD 4½ @ 9690	8/16/85	Survey, Yoakum Co., TX

$\overline{\mathtt{VII}}$

- Anticipated Average Daily Injection 500
 Maximum Daily Injection 1500
- 2. Closed System
- 3. Anticipated Average Pressure 1100 Maximum Pressure - 1600
- 4. Produced water from Bronco Devonian and Bronco Wolfcamp

VIII

Geologic Data Previously Submitted

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No Stimulation Anticipated

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Logs Previously Submitted

XI

Sample #1 1/4 mile NE of Unit Well No. 7 Sample #2 400 feet West of Unit Well No. 7

XII

There are no open faults or any other hydrologic connection between the injection zone and any underground source of drinking water based on the available geologic and engineering data

1.00

TAMERACE BWCU

SAHPLE POINT: #2 (WEST OF PWOU #7) *: The

SAMPLE DATE: 7-3-86

pH: 7.1 H28: -SPECIFIC GRAVITY: 1

TITTATED AND CALCULATED IONS

	MILLIGRAMS FER LITER	MILLIEGUIVALENTS FER LITER
MECT	341.60	5.60
C)	1963.00	29.94
804	25.00	0.52
Ca.	455.00	22.75
Mg	0.00	0.00
Na	306.23	13.31

10NIC STRENGTH = 0.05

TOTAL HARDNESS = 1050.0 mg/ltr.

TOTAL DISSOLVED SOLIDS = 2190.0 mg/ltr.

PROBABLE MINERAL COMPOSITION AND 10% PAIRING

	MILLIEQUIVALENTS PEP LITER	MILLIGRAMS PER LITER
Ca(HCO3)2	5.60	453.82
	V. 52	35,45
	16.63	722.92
hp HCDI)I	0.0 <u>0</u>	2. GC
Mp554	♡. Ø0	C. 20€
MoCli	0.00	Ø.00
MaHCG3 Ma2804	Ø. ØC	Ø. ØØ
naibu a tati	0.00	Ø.00
De territoria	i3.31	778.37

CALCULATED SCALING TENDENCIES

SCALING INDEX

CaCO3 @ 80 DEG F. = 0.8 CaCO3 @ 120 DEG F. = 1.2

SATURATION FOINT

CaSO4 @ 70 DEG F. = 1775.3 MG/LTR. CaSO4 & 110 DEG F. = 1829.7 MG/LTR.

(THIS SAMPLE CONTAINED 35.5 MG/LTR. CaSO4)

als/iww

COMPANY: TAMORACE LEASE: BWCU

LAMME POINT: #1 (NE OF BWCL #7) '_

FAMMLE DATE: 7-3-86

6H: 7.1 H2S: -SPECIFIC GRAVITY: :

TITRATED AND CALCULATED JONE

MILLIGHANS

MILLIEQUIVALENTS FER LITER FER LITER

HOGT 378.20 6.20 200 850.80 23.91 504 50.00 1.04 De 480.00 24,00 Mc Ø., ØC 0.00 165.78 7.21

JONIC STRENGTH = 0.04 TOTAL HARDNESS = 1200.0 mg/ltr. TOTAL DISSOLVED SOLIDS = 1924.6 mg/ltr.

PROBABLE MINERAL COMPOSITION AND ION PAIRING

	MILLIEGUIVALENTE	MILLIGRAME
	CEA LITER	PER LITER
Ca(H103)1	6.20	502.45
C 5 G D 4	1 . Q1 de.	7 0. 91
CaClT	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	930.09
ACTIONS	(2) <u>. (2) (2</u>	Ø. ØØ
Mig GOL	C C.C.	C. 02
Mar. Cold Co	Z. 00	Ø . Ø?
1.eHCCT	C (2)C	E . GZ
N. 22 (2) St. (1) (2).	Z . Z Z	2.02
NaCl	A so that it	421.37

CALCULATED ECALING TENDENCIES

SCALING INDEX

CACOS 6 80 DEG F. = 0.9 Cacos 6 120 DEG F. = 1.2

SATURATION POINT

CaSO4 @ 700 DEG F. = 1758.0 MG/LTR.

CaSO4 @ 110 DEG F. = 1812.2 MG/LTR.

(THIS SAMPLE CONTAINED 70.9 MG/LTR. CaSO4)

alc/lww

AFFIDAVIT OF PUBLICATION

State of New Mexico,
County of Lea.
1,
Robert L. Summers
of the Hobbs Daily News-Sun, a daily newspaper published at Hobbs, New Mexico, do solemnly swear that the clipping attached hereto was published once a week in the regular and entire issue of said paper, and not in a supplement thereof for a period
of
Oneweeks
Beginning with the issue dated
July 11 , 1986
and ending with the issue dated
July 11, 19 86
Publisher.
Sworn and subscribed to before
me this day of
July , 1986
July 1986 Jera Murphy Notary Pyblic.
My Commission expires
Mov. 14, 1988

This newspaper is duly qualified to publish legal notices or advertisements within the meaning of Section 3. Chapter 167, Laws of 1937, and payment of fees for said publication has been made.

Bronco Tollans 37

LEGAL NOTICE
JULY 11, 1986

NOTICE OF APPLICATION
FOR FLUID INJECTION
Tamarack Petroleum Company, Inc. 500 West Texas Suite
1485 Midland, TX 79701, (915,
583-5474, Randy A. McClay.
Engineering Manager, is
making application to the New
Mexico Oil Conservation
Commission for permission to
inject fluid into a formation
productive of oil or gas.
The applicant proposes to

The applicant proposes to inject produced water in Bronco Wolfcamp Unit Well No. 7 J-2-13S-38E into the Wolfcamp Formation from 9068-9100 feet, for the purpose

of secondary recovery.

The maximum injection will be 700 barrels of water at 1600

psig.
Interested parties must file objection or requests for hearing with the Oil Conservation Commission Division, P.O. Box 2088, Santa Fe, New Mexico 87501 within 15 days.



-		
TUTAN NETUI	1 The following service is requested before the one Show to whom and date delivered. Show to whom, date and ad tress of delivery. RESTRICTED DELIVERY. Show to whom and date delivered. RESTRICTED DELIVERY. Show to whom date, and address of delivery. (CONSULT POSTMASTER FOR FEES.	: :
2	2 ARTICLE ADDRESSED TO	
034718101817419018	TXO Production Co. 415 W. Wall 'fidland, TX 79701 3 ARTICLE DESCRIPTION REGISTERED NO CERTIFIED NO SURED NO SURED NO CANADA (Always obtain signature of addressee or agent) Thave received the article described above	-
	SIGNATURE To Addressee To Authorized ager	1
INSURED AND CERTIFIED	DATE OF DELIVERY POSTMARK 7 - 2 - 8 = 5 5 ADDRESS/Compress only if requested.	
IED M/	6 UNABLE TO DELIVER BECAUSE. CLERK'S INITIALS	
	** 680 1977 - 0 - 2 4 9,	56

Show to whom, date, and address of delivery	0		ola the RETURN TO Harry ve
NITIALS	-	Show to whom and date or Show to whom, date, and a RESTRICTED DELIVERY Show to whom and date of RESTRICTED DELIVERY Show to whom, date, and a	elivered
NITIALS	2 AR 3 AR REGI	Hollis W. Har 1110 Clyde — Amarillo TX-7 TICLE DESCRIPTION	9106
NITIALS	(/	Always obtain signature of	addressee or agent)
NITIALS	I have SIGNA 4 DAT 5. ADE	received the article description of the Addressee Addressee Fe OF DELIVERY Complete privit regulations The Complete privit regulations of the Addressee The Complete privity is regulated to the Addressee The Complete privity is required to the Addressee The Co	bed above Authorized agent POSTMARK ested
	6 UNA	ABLE TO DELIVER BECAU	

	Courses a
	☐ ○ SENDER Complete items 1.2 and 3 Add your address in the RETURN TO scace or, reverse
THE CAN	CENDER Comblete items 1.2 at a 2. Add your address in the RETURN TO space or. 1. The following service is requested icheck one. Show to whom and date delivered Show to whom, date, and address of delivery RESTRICTED DELIVERY Show to whom and date delivered RESTRICTED DELIVERY Show to whom and date delivered RESTRICTED DELIVERY Show to whom, date, and address of delivery Show to whom, date, and address of delivery CONSULT POSTMASTER FOR FEES
RECEIPT REGISTERED	Amerada Hess Corp. P O Box 840 Seminole TX 79360 3 ARTICLE DESCRIPTION REGISTERED NO CERTIFIED NO INSURED NO
Ę	(Always obtain signature of addressee or agent)
ED INSURED AND CERTIFIE	Thave received the anicle described above SIGNATURE Addressee Authorized agent DATE OF DELIVERY POSTMARK 5. ADDRESS(Complete only if requested)
MAL	6. UNABLE TO DELIVER BECAUSE CLERK'S INITIALS
	#30FC 1977 - 0 - 249 595

- p					
S hurai	SENDER Complete nems 1 2 and 3 Add your address in the RETURN reverse	TO space or			
25 Form 3811, Apr 1977 RETURN	1. The following service is requested (check one) Show to whom and date delivered. Show to whom, date, and address of delivery. RESTRICTED DELIVERY Show to whom and date delivered. RESTRICTED DELIVERY Show to whom, date, and address of delivery. (CONSULT POSTMASTER FOR FEES)				
	2. ARTICLE ADDRESSED TO				
RECEIPT REGISTERED	ARCO 011&Gas Co. F. O. Box 1610 11 dland, TX 79702 3. ARTICLÉ DESCHIPTION REGISTERED NO. CERTIFIED NO. INSURED NO.				
E -	(Always obtain signature of addressee or agent)				
INSUF	I have received the article described above SIGNATURE Addressee Authorized agent DATE OF DELIVERY POSTMARK 5 ADDRESS(Complete only if requested) ALCO OI TOTAL TX 1610				
IED MAII	6. UNABLE TO DELIVER BECAUSE:	CLERK'S INITIALS Lite			

NO. OF COPIES RECI				
DISTRIBUTIO		-		
SANTA FE				
FILE				
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LAND OFFICE				
IRANSPORTER	OIL			
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OPERATOR				
PRORATION OF				
Operator				

NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE

Form C-104 Supersedes Old C-104 and C-110

	FILE		AND		Effective 1-1-65				
	U.S.G.S.	AUTHORIZATION TO TRAN		NATURAL G	Δ\$				
	LAND OFFICE	ACTIONIZATION TO TRAI	101 011 012 7110		,				
	OIL								
	TRANSPORTER GAS								
	OPERATOR								
1.	PRORATION OFFICE								
1.	Operator								
	Tamarack Petroleum	Co. Tro.							
	Address	ess							
	P. O. Box 2046, Mid	land, Texas 79702							
	Reason(s) for filing (Check proper box)		Other (Plea	se explain)					
	New Well	Change in Transporter of:	_						
	Recompletion	Oil 🛣 Dry Gas							
	Change in Ownership	Casinghead Gas Condens	sate						
	If change of ownership give name and address of previous owner								
	and address of previous entire.								
II.	DESCRIPTION OF WELL AND I	EASE							
	Lease Name	Well No. Pool Name, Including Fo	rmation	Kind of Lease	I - I				
	Bronco (Wolfcamp) Unit	7 Bronco (Wolfcar	mp)	State, Federa	Fee Fee				
	Location								
	Unit Letter J ; 211	O Feet From The South Line	and 1813	Feet From 7	The East				
	Line of Section 2 Tow	nship 13-S Range	38E , NMF	°М,	County				
III.	DESIGNATION OF TRANSPORT	ER OF OIL AND NATURAL GAS	S		ved copy of this form is to be sent)				
	Name of Authorized Transporter of Oil	or Condensate							
	Phillips Pipeline C	0.	101-A Philli	ps Bldg., (Odessa, TX 79761 ved copy of this form is to be sent)				
	Name of Authorized Transporter of Cas	inghead Gas or Dry Gas	Address (Give addres	s to which appro-	yea copy of this form is to be sent)				
	·								
	If well produces oil or liquids,	Unit Sec. Twp. Rge.	is gas actually conne	cted? Who	en				
	give location of tanks.	B 2 13-S 38E							
	If this production is commingled wit	h that from any other lease or pool,	give commingling or	ler number:					
IV.	COMPLETION DATA				Plug Back Same Res'v. Diff. Res'v.				
	Designate Type of Completion	Oil Well Gas Well	New Well Workove	r Deepen	Plug Back Sume Nes V. Diff. Nes V.				
	Designate Type of Completion		<u> </u>		12272				
	Date Spudded	Date Compl. Ready to Prod.	Total Depth		P.B.T.D.				
					Tubing Depth				
	Elevations (DF, RKB, RT, GR, etc.)	Name of Froducing Formation	Top Oil/Gas Pay		Tubing Depth				
					Depth Casing Shoe				
	Perforations				Depth Cdamy biles				
		TUBING, CASING, AND			SACKS CEMENT				
	HOLE SIZE	CASING & TUBING SIZE	DEPTH	SEI	SACKS CEMENT				
		<u> </u>							
V.	TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a)	fter recovery of total v pth or be for full 24 ho	olume of load oil urs)	and must be equal to or exceed top allow-				
	OIL WELL	Date of Test	Producing Method (Flow, pump, gas lift, etc.)						
	Date First New Oil Run To Tanks	Date of 1980							
		Tubing Pressure	Casing Pressure		Choke Size				
	Length of Test	Tubing Trooper							
	Actual Prod. During Test	Oil - Bbls.	Water - Bbls.		Gas - MCF				
	Actual Flod, During 1981								
	CAS WELL								
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/M	MCF	Gravity of Condensate				
	Actual Flod: Test-Mo. 75								
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (S)	ut-in)	Choke Size				
	resting Method (phot, buck pity								
WE CERTIFICATE OF COMPLIANCE OIL CONSERVATION COMMISSION									
VI	. CERTIFICATE OF COMPLIAN	CE							
		to the Cit Concernation	APPROVED -	MAK [7]	97/				
	a land to the same and the same	regulations of the Oil Conservation with and that the information given							
	above is true and complete to th	e best of my knowledge and belief.	BY		lorm C				
	-			Orig. Signed by Jerry Sexton Dist 1, Supv.					
			11	14					
This form is to be filed in compliance with RULE 1104.									
	Trederick for	2832			wable for a newly drilled or deepened anied by a tabulation of the deviation				
					ordance with HULE III.				
	Data Coordinator		All sections of this form must be filled out completely for allow-						
	(T	itle)	able on new and	able on new and recompleted wells.					
					only Sections I, II, III, and VI for changes of owner, number, or transporter, or other such change of condition.				
	March, 10, 1977 (D	ate)	well name or nur	nems C-104 mm	at be filed for each pool in multiply				
			completed wells		st be filed for each pool in multiply				
			•						