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1	SANTA FE				
	FILE				
	U.S.G.S.				
i	LAND OFFICE				
1.	TRANSPORTER	OIL			
	INANSFORTER	GAS			
	OPERATOR				
	PRORATION OFFICE				
	Operator	-			
	Oleum Incorpora				
	1 44				

## NEW MEXICO OIL CONSERVATION COMMISSION

Form C =104

SANTA FE	REQUEST I	FOR ALLOWABLE	Supersedes Oid C-104 and C-110 Effective 1-1-65			
FILE		AND				
U.S.G.S.	AUTHORIZATION TO TRA	NSPORT OIL AND NATURAL G	AS			
LAND OFFICE						
TRANSPORTER OIL GAS						
OPERATOR						
PRORATION OFFICE						
Operator						
Oleum Incorporat	ed		<u> </u>			
•	ongview, Texas 75601	101 (01				
Reason(s) for filing (Check proper box)		Other (Please explain)				
New Well	Change in Transporter of:					
Recompletion	Oil . Dry Ga		1 1070			
Change in Ownership X	Casinghead Gas Conder	nsate Effective Januar	y 1, 1970			
			- FF ( 0 )			
If change of ownership give name and address of previous owner	Trice Production Co	ompany - Drawer 2232 - Lo	ongview, Texas 75601			
II. DESCRIPTION OF WELL AND I	LEASE	ormation Kind of Lease	Lease No.			
Lease Name	Well No. Pool Name, mercaning i		or Fee State B-10363			
Lazy J State	1 Lazy J (Penr	n.)	D-10000			
	60 Feet From The N Lin	ne and 1,980 Feet From	rheW			
2 -	unship 14S Range	33E , NMPM,	Lea County			
Line of Cection	vitanip					
II. DESIGNATION OF TRANSPOR	ESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  Address (Give address to which approved copy of this form is to be sent)					
Name of Authorized Transporter of Ot.	e Tine Company	P. O. Box 1510 - Mid	land, Texas <b>7</b> 9701			
Texas-New Mexico Pip	singhead Gas Or Dry Gas	Address (Give address to which appro	ved copy of this form is to be sent)			
Name of Authorized Transporter of Car Warren Petroleum Cor	-	P. O. Box 1589 - Tul				
	Unit Sec. Twp. P.ge.		en			
If well produces oil or liquids, give location of tanks.	C 2 14S 33E					
If this production is commingled wi	th 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 Resty. Diff. Resty.			
Designate Type of Completi	on = (X)		i i			
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.			
		Top Oil/Gas Pay	Tubing Depth			
Elevations (DF, RKB, RT, GR, etc.,	Name of Producing Formation	100 0 0				
Perforations			Depth Casing Shoe			
	THRING CACING A	ND CEMENTING RECORD				
		DEPTH SET	SACKS CEMENT			
HOLE SIZE	CASING & TUBING SIZE	DEFIN SET				
	TOD ATTOWART CO	after recovery of total values of land of	il and must be equal to or exceed top allo			
V. TEST DATA AND REQUEST I	FOR ALLOWABLE (Test must be able for this	depth or be for full 24 hours)				
OH, WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas	ust, etc.)			
		Garden Breadure	Choke Size			
Length of Test	Tubing Pressure	Casing Pressure				
Actual Prod. During Test	Oii-Bbis.	Water-Bbls.	Gas - MCF			
GAS WELL		2005	Gravity of Condensate			
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF				
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Fressure (Shut-in)	Choke Size			
		OU CONSER	VATION COMMISSION			
VI. CERTIFICATE OF COMPLIA	NCE	DIL CONSER	A 9 2 1070			
	I Indiana at the Oil Commemoti	on APPROVED	. 19			
I hereby certify that the rules an	d regulations of the Oil Conservati	ren de la	Kimus			
above is true and complete to	the best of my knowledge and beli	of. BY SUPERVISO	OH LASTRICI			
		TITLE	7			

Tenea Munnich	
(Signature)	İ
Production Accountant	

January 29, 1970

(Date)

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 allowable on new and recompleted wells.

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