	NO. 11 CORTES RECEIVED 1			<del>-</del> / • •				
	DISTRIBUTION							
	SANTA FE	MEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE AND		Form C-194  Supersedes Old C-104 and C-110				
	FILE			Effective 1-1-65				
	U.S.G.S.	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS						
	LAND OFFICE	ACTIONIZATION TO TRANSPORT SIZ AND TRANSPORTE SAS						
	TRANSPORTER GAS GAS							
	OPERATOR							
1.	PRORATION OFFICE							
	Operator  Apache Exploration Corporation  Address							
	P. O. Box 2299, Tulsa, Oklahoma 74101							
	Reason(s) for filing (Check proper box)  Other (Please explain)							
	New Well Change in Transporter of:							
	Recompletion Oil Dry Gus							
	Change in Ownership	Casinghead Gas Conden	nsate					
	If change of ownership give name and address of previous owner	elaware-Apache Corporati	ton, 1720 Wilco Building,	Midland, Texas 79701				
11.	DESCRIPTION OF WELL AND I	LEASE   Well No.   Pool Name, including F	formation   Kind of Lease	Lease No.				
	Lease Name	1 -		or Fee State E9697				
	High Plains	1 High Plains	Penn	State E3097				
	Location  A 660 For Figure The North toward 660 Feet From The East							
	Unit Letter A ; 660 Feet From The North Line and 660 Feet From The East							
	Line of Section 22 Tow	mship 148 Range	34E , NMPM, L	<b>ea</b> County				
III.	DESIGNATION OF TRANSPORT	FER OF OIL AND NATURAL GA	AS					
	Name of Authorized Transporter of Oil		Address (Give address to which approv					
	The Permian Corporation  P. O. Box 1183, Houston, Texas  Name of Authorized Transporter of Casinghead Gas X (8.6956%)  P. O. Box 1183, Houston, Texas  P. O. Box 1183, Houston, Texas  P. O. Box 1183, Houston, Texas							
		Corporation (91.3044%)	F. O. Box 1589, TuBa, 500 W. Illinois, Midlan is gas actually connected?	d, Texas 79701				
	If well produces oil or liquids, give location of tanks.	I 15 148 34E	Yes	March 20, 1965				
		<del></del>	give commingling order number: Not	······································				
	COMPLETION DATA	this production is commingled with that from any other lease or pool, give commingling order number: Not applicable						
	Designate Type of Completion	on - (X)	New Weil Workover Deepen	Plug Back   Same Restv. Diff. Restv.				
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.				
				Tubing Depth				
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	I nowid paptu				
				Depth Casing Shoe				
	Perforations							
	TUBING, CASING, AND CEMENTING RECORD							
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT				
	HOCE SIZE							
∜.	TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable.  OIL WELL							
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas li)	(t, etc.)				
		Muhim Danzer	Casing Pressure	Choke Size				
	Length of Test	Tubing Pressure	Captif Ligarma					
	Actual Prod. During Test	Oil-Bbis.	Water - Bile.	Gas - MCF				

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pu	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
Actual Prod. During Test	Oil-Bhis.	Water - Bld B.	Gas - MCF	

GAS WELL

1	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
ļ	Teating Method (pitot, back pr.)	Tubing Pressure (Shut-in )	Cosing Pressure (Shut-in)	Choke Size
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## VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Regional Production Administrator

(Title)

August 8, 1972

(Date)

OIL CONSERVATION COMMISSION

AUG 14 1972 APPROVED Orig. Signed by Joe D. Ramey Dist. L. Supv.

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 AULE 111.

All sections of this form must be filled out completely for silow-able 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 completed wells.