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SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
INANSPORTER	G AS		
OPERATOR			
PRORATION OF			

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-104

Ţ	SANTA FE	_	REQUEST F	OR ALLOWABLE		Supersedes Of Effective 1-1-	ld C-104 and C-110 65			
	FILE		AUTHORIZATION TO TRAN	AND ISPORT OIL AND N	JATURAL G	AS				
}	U.S.G.S.		AUTHORIZATION TO TRAIN	STORT OIL AND I	TATORAL O					
	TRANSPORTER OIL GAS									
l	OPERATOR									
1.	PRORATION OFFICE									
	FEATHERSTONE DEVELOR	EATHERSTONE DEVELOPMENT CORPORATION								
	1717 West Second Street, Roswell, New Mexico 88201 Reason(s) for filing (Check proper box) Other (Please explain)									
	New Well		Change in Transporter of: Oil Dry Gas							
	Recompletion Change in Ownership X		Casinghead Gas Condens	ate						
	If change of ownership give nam	e	OLEN F. FEATHERSTONE	1717 West Sec	cond, Rosw	vell. New Mexi	co 88201			
II.	DESCRIPTION OF WELL AN	ND I	LEASE	1.	Kind of Lease		NM-ase No.			
	Lease Name	•	Well No. Pool Name, Including For 1 Morton Permo F			or Foo Federal	0228436B			
	Amerada Federal		1 MORANT POURO	enn wioot			102201300			
	Unit Letter H ;	198	O Feet From The North Line	and <u>660</u>	Feet From T	he <u>East</u>				
	Line of Section 31	Tov	waship 14 South Range	35 East , NMPN		Lea	County			
m.	DESIGNATION OF TRANSPO	or	TER OF OIL AND NATURAL GAS	Address (Gine address	to which approx	ed capy of this form is	tp,be sent)			
	Name of Authorized Transporter of	011	X or Condensate	2300 Contine			lding			
	Name of Authorized Transporter of	any	singhead Gas X or Dry Gas	Fort Worth Address (Give address	to which approv	oed copy of this form is	to be sent)			
	Tipperary Resources			500 West Ill			79701			
	If well produces oil or liquids,	_ <u></u>		Is gas actually connect		en.				
	give location of tanks.		H 31 14S 35E	<u> Yes</u>		November 15.	1967			
IV.	If this production is commingled COMPLETION DATA	this production is commingled with that from any other lease or pool, give commingling order number: COMPLETION DATA Oil Well Gas Well New Well Workover Deepen Plug Back Same Res'v. Diff. Res'v.								
	Designate Type of Compl	etic			1					
	Date Spudded		Date Compl. Ready to Prod.	Total Depth		P.B.T.D.				
	Elevations (DF, RKB, RT, GR, es	c. j	Name of Producing Formation	Top Oil/Gas Pay		Tubing Depth				
	Perforations					Depth Casing Shoe				
			TUBING, CASING, AND	CEMENTING RECO	CEMENTING RECORD					
	HOLE SIZE		CASING & TUBING SIZE	DEPTH S		SACKS CE	EMENT			
	HOCE SIZE									
						 				
w	TEST DATA AND REQUES	rF	OR ALLOWABLE (Test must be of	ter recovery of total vol	ume of load oil	and must be equal to o	r exceed top allow-			
▼.	OIL WELL		able for this dep	oth or be for full 24 hour Producing Method (Flo	*)					
	Date First New Oil Run To Tanks)	Date of Test	Producing Method (F.s.	w, pamp, gos 11,	11, 41017				
	Length of Test		Tubing Pressure	Casing Pressure		Choke Size				
	Actual Prod. During Test		Oil-Bble.	Water - Bbls.		Gas - MCF				
	CAS WELL									
	Actual Prod. Test-MCF/D		Length of Test	Bbis. Condensate/MMC	CF	Gravity of Condensa	it•			
•	Testing Method (pitot, back pr.)		Tubing Pressure (Shut-in)	Casing Pressure (Shu	t-in)	Choke Size				
VI	VI. CERTIFICATE OF COMPLIANCE			OIL APPROVED		ation commissi $1.3 1972$	ON 19 			
	Commission have been compli	hei	regulations of the Oil Conservation with and that the information given	Orig Signed by						
	above is true and complete to	e best of my knowledge and belief.	Joe D. Ramey							
	(Signature) Production Clerk (Title) October 11, 1972 (Date)			TITLE Diat. I, Super.						
				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 transporten or other such change of condition.						
		,-	••••			it be filed for each				