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DISTRIBUTION	NEW MEXICO OIL C	CONSERVATION COMMISSIC.	
SANTA FE		FOR ALLOWABLE	Form C=104 Supersedes Old C=104 and C=1
FILE	NEGOES!	AND	Effective 1-1-65
U.S.G.S.	ALITHOPIZATION TO TR	ANSPORT OIL AND NATURAL G	
LAND OFFICE	AUTHORIZATION TO TRA	ANSPURT OIL AND NATURAL G	AS
OIL	-		
TRANSPORTER GAS	-		
OPERATOR	-		
	4		
Operator Operator			* · · · · · · · · · · · · · · · · · · ·
1	011.0		
Address	Oil Corporation		
	ding, Midland, Texas 7	9701	
Reason(s) for filing (Check proper box	)	Other (Please explain)	
New Well	Change in Transporter of:		
Recompletion	Oil Dry Go		
Change in Ownership X	Casinghead Gas Conder	<b>=</b>	
	October Contract		
and address of previous owner  DESCRIPTION OF WELL AND Lease Name	LEASE Well No. Pool Name, Including F		/ Lease No.
Stan	l North Bagley	Penn State, Federal	or Fee Fee
	660 Feet From The East Lin	33-E , NMPM, Le	
Dine of Section 5	montp 12 D Mange	OO LI , MMFM, LE	County
. DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA	s	
Name of Authorized Transporter of Oil	or Condensate	Address (Give address to which approve	d copy of this form is to be sent)
The Permian Corp	poration	P. O. Box 3119, Midlar	nd. Texas 79701
Name of Authorized Transporter of Cas	singhead Gas [X] or Dry Gas	Address (Give address to which approve	
Warren Petroleum	Corporation	P. O. Box 1589, Tulsa,	
	Unit Sec. Twp. Rge.	Is gas actually connected? When	
If well produces oil or liquids, give location of tanks.	I 9 12 33	· ·	Vaiting on Warren
If this production is commingled with COMPLETION DATA	th that from any other lease or pool,	give commingling order number:	
	Oll Well Gas Well	New Well Workover Deepen	Plug Back   Same Res'v. Diff. Res'v.
Designate Type of Completion	on = (X)	! ! !	1 1
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
Perforations			Depth Casing Shoe
	T	CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
. TEST DATA AND REQUEST FO	OR ALLOWABLE (Test must be a) able for this de	fter recovery of total volume of load oil an pth or be for full 24 hours)	d must be equal to or exceed 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
	<u> </u>	Water-Bbls.	· · · · · · · · · · · · · · · · · · ·

GAS WELL Length of Test Bbls. Condensate/MMCF Actual Prod. Test-MCF/D Gravity of Condensate Tubing Pressure (Shut-in) Casing Pressure (Shut-in) Testing Method (pitot, back pr.) Choke Size

## 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 gives above is true and complete to the best of my knowledge and belief
Signature)
(Signature)
Engineer
(Title)
October 21, 1971
(Date)

OIL CONSERVATION COMMISSION

9 1971 NOV APPROVED\_ Orig. Signed by Joe D. Ramey Dist. I, Supv. TITLE. This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or despened 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 completed wells.

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