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DISTRIBUTION			
SANT 4 FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
I WALLS OUT PL		1 "	1

SANT & FE		1						OR ALLOWABLE					Form C-104 Supersedes Old C-104 and C-110			
FILE]				AN	ID					Lifect	1-1-6	\$	
U.S.G.S. LAND OFFICE			-	AUTHO	RIZATI	ON TO TRA	ANSP	ORT C	DIL ANI	CAN C	TURAL	GAS				
	OIL		1			· ·			•							
TRANSPORTER	G AS]								•				•	
OPERATOR PRORATION OFF	ICE		-													
Shenandoah		orpora	tion	1												
Address			····					^								
1500 Commer				ort W	orth, '	Texas -	6T0		ther (Ple		ola in 1					
Reason(s) for filing (New We!l		roper bux		Change in	Transpor	ter of:			11161 (1 10		,			•		ł
Recompletion				011 Santanbar	-4 6	Dry G		$ \mathbf{q} $	Effe	etiv	re NOV	EMBER			Lun	
Change in Ownership		·		Casinghed		<u></u>		<u> </u>	7 7 7		/	- /-				
change of owners and address of prev	hip give ious ow	ner	Great	WEST	ern Dr	illing Co	mpai	ny, B	OX 16:	59, 1	iidlan	a, Te	æs,	79701		
ESCRIPTION O	F WEL	L AND	LEAS	E Well No.	Pool Nam	ne, Including F	`ormat	ion		Kı	nd of Lea	ıse		-	Lease	No.
Legse Name Malmar Unit	Trac	t 1		2		mar-Grayl			Α.	Ste	ite, K94 8	YKYKX	K		B-214 B-222	8
Location		10	00		17	lact		66	:0	_	-		Nort	⊦h	_	
Unit Letter	<u> </u>	;;	80	Feet From	m The $\underline{ ext{E}}$	astti	ne and	00		!	Feet From	n The	NOL	<u> </u>		
Line of Section	13	То	wnship	17 So	uth	Range 3	2 Eas	st	, NM	IPM,			Lea	,	Co	unty
DESIGNATION O	F TRA	NSPOR	TER_C	OF OIL	AND NA	ATURAL G.	1 <u>S</u>	<u>_</u>	4/-	, , ,	<u>* </u>	, <u>.</u>	7)	<u>, / (.</u>	*	
Name of Authorized	Transpor	ter of Oi.	XX	or C	ondensate		Acid		ive addre				y of this	jorm is t	to be sent)	
Texas New 1	Transpor	ter of Ca	TITIE TITIE	d Gas [X	X or Dr	y Gas							y of this	form is t	to be sent,	,—
Phi llips P o							,	Box 6666, Odessa, Texas								
If well produces oil give location of tank		s,	Unit	Sec.	1		Is q	Yes	ally conn	ected?	, v	Vhen U	nknowi	n		
this production is		ngled wi	th that						ngling o		mber:	Plua	Back	Same Re	s'v. Diff.	Hes'v.
Designate Typ	e of C	ompleti	on — ()ii Well	Gas Well	Nev	v Well	i i	er ;	Deebeii	l !	1	Came Her		
Date Spuddod			Date	Compl. F	leady to F	rod.	Tot	ai Depti	h			P.B.	T.D.			
Elevations (DF, RKB, RT, GR, etc.; Name of Producing Formation				Тог	O!1/G	ıs Pay			Tub	Tubing Depth						
Perforations									 _		· · · · · · · · · · · · · · · · · · ·	Dept	ih Casing	; Shoe		
					TURING	CASING, AN	D CF	MENTI	NG REC	ORD		i			.,	
HOLE	SIZE	·	T			ING SIZE			DEPT				SA	CKS CE	MENT	
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TEST DATA AN	D REQ	UES: F	OR A	LLOWA	BLE	Test must be able for this c	after r lepth o	ecovery or be for	of total i	volume ours)	of load o	oil and m	ist be eq	ual to or	exceed to	; allow-
OII, WELL Date First New Oil	Run To	Tanks	Date	of Test		0000 70" 11110		-	Method (ump, gas	lift, etc.	.)			
			J				C	Casing Pressure Chol					ke Size			
Length of Teat			Tubi	Tubing Pressure												
Actual Prod. During	al Prod. During Test Oil-Bbis.				Wa	Water-Bbls. Gas				-MCF						
		•								'						
GAS WELL Actual Prod. Test-	MCE/D		1.enc	gth of Te			Въ	ls. Cond	densate/N	MCF		Gra	vity of C	ondensate	•	
									Choke Size							
Testing Method (pit	ot, back	pr.)	Tubi	Tubing Pressure (Shut-in)		Ca	Coming Pressure (Shut-in)				Cne					
CERTIFICATE (OF CO	MPLIA	ICE						01		NSER'	VATIO	N CON	MISSIC	NC	
I harabu cartifu th	at the r	ules and	regula	ations of	the Oil	Conservation	, A	PPRO	VED_						, 19	
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.				. B	APPROVED, 19											
	p.				•		-	171 =					13.			
		_		,			∥ '								E 1104.	
- P Bate						.					towahle.	for a ne	ewly dril	iled or de	epened	
T. P. Bates (Signature)						V	well, th	is form	must t the we	e accon	npanied cordanc	by a tac e with i	RULE 1	11.	714.10.1	
Vice President, Secondary Recovery (Title)						- 11	tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for silowable on new and recompleted wells.									
November 8	3, 197	•					- 17			1	1	17 777	, and V	I for ch	anges of	owner, ndition.
			Date)				- il 🐧	well na -	me of nu	mber,	or trans	batter or	Office .	GCH CHE	nge of con	