NO OF COPIES RECEIVED I	<b>-1</b> - <b>1</b>		.*			
DISTRIBUTION						
SANTAFE					Form C-104	
File		REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS			Supersedes Old C-104 and C-, Elfoctive 1-1-65	
U.S.G.S.	AUTHORIZATION TO T					
LAND OFFICE			INTOINE OAD			
TRANSPORTER   OIL						
GAS GAS GAS						
PHORATION OF CE						
Cperator					·	
	roleum Corporation					
Adura						
Reason(s) for thing (Check proper be	Southwest Bldg., Hor					
New Well	Change in Transporter of:	Other (Pleas	e explain)			
Becom, levion	Oll Dry	Gas				
Change in Collection Ship 🔀	Casinghead Gas Conc	iensate				
If change of expership give name	Sunset Internation				<b></b> 0, <u></u>	
and address of previous owner	2400 Fidelity Unio	on Tower, Dal	las, Texas	75201		
DESCRIPTION OF WELL AND	Vell No. Ma Ngramariding		Kind of Lease		Large Ma	
Mal-Gra Unit - CH	PS 1 Andres)	Stayburg San	State, Federal or Fe	* State	B-2148	
Location	1980 s	1000			<u>B-2229</u>	
Unit Letter ;;	Feet From The L	ine and	Feet From The	E		
Line Jection 20 T	ownship 175 Range	<u>33E</u> , NMPI	4, Lea	·····	County	
DESIGNATION OF TRANSPOL	RTER OF OIL AND NATURAL G	AS SA	1 styl			
Name of Authorized Transporter of O	11 X or Condensate	Address (Give address	to which approved cop	y of this form is	to be sent)	
Texas-New Mexico		P. O. Box	1510 Midland	d, Texas	79701	
Nan + 51 Authorizes Transporter of C		Address (Give address			to be sent)	
Phillips Petroleu			le, Oklahoma	a 74003		
If well produces ciller liquids,	Unit Sec. Twp. P.ge. O 20 175 33	Is gas actually connec	ted? When			
give location of tanks.						
If this production is commingled w COMPLETION DATA	with that from any other lease or pool	l, give commingling orde	r number:			
	Oil Well Gas Well	New Well Workover	Deepen Plug	Back   Same Re	s'v. Diff. Res'v	
Designate Type of Complet		1 1	· · · · · · · · · · · · · · · · · · ·	i		
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.	T.D.		
Levations (DF, RKB, RT, GR, etc.,	Name of Producing Formation	Top Oll/Gas Pay	Tubir	ng Depth		
Perforations			Depti	n Casing Shoe		
			İ			
•	<u> </u>	ND CEMENTING RECO				
HOLE SIZE	CASING & TUBING SIZE	DEPTH S	ET	SACKS CE	MENT	
:						
			• • • • • •			
TEST DATA AND REQUEST I	FOR ALLOWABLE (Test must be	after recovery of total vol		st be equal to or	exceed top allo	
GHL WELL		depth or be for full 24 hour				
Date First New CL Aun To Tanks	Date of Test	Producing Method (Flo	w, pump, gas lijt, etc.)			
Length of Tubl	Tubing Pressure	Casing Pressure	Chok	• Size		
Advid From During Teet	Oil-Bble.	Water-Bbls.	Gae -	MCF		
GAS AELL			-			
A 11, 8792, 7681+MOR/D	Length of Test	Bbla. Condenagte/MMC	if Gravi	Gravity of Condensate		
Tes Versis (puol, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut	-in) Chok	• Size		
and a second second second second second		-	-			
CEAUFICAL & OF COMPLIAN	NCE	OII_	CONSERVATION	COMMISSIO	N	
			11 V 1 2 197			
I needs, needs to must the rules and	regulations of the Oil Conservation	APPROVED		<del>]</del> .	19	
Communication ave over complied	with and that the information given be best of my knowledge and belief.		wK	mia	n	
		1 Portes	Geoloais	SI (		
H. R. Jam		TITLE				
d Dal	1		be filed in compli			
_11. 1. 512000	pein	If this is a rec	uest for allowable for the accompanied by	or a nowly drill a tabulation	led or despens of the deviation	
(Siz)	(juwe)	tests taken on the	well in accordance	with RULE 11	1. 1.	

If this is a request for allowable for a newly drilled or despend 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 allow-able on provide decompleted multi-

Agent