| `  | SANTA FE<br>FILE<br>U.S.G.S.<br>LAND OFFICE   | REQUE   | IL CONSERVATION COMMISSION<br>ST FOR ALLOWABLE<br>AND<br>TRANSPORT OIL AND NATURAL   | Form C-104<br>Supersedes Old C-104 and C-11<br>Effective 1-1-65<br>GAS |    |
|--|---|---|--|--|----|
| I.   | TRANSPORTER OIL GAS OPERATOR PRORATION OFFICE Operator  |   |  |  |    |
|  | Address Pennzoil Company  |   |  |  |    |
|  | P. O. Drawer 1828 - Midland, Texas 79701  |   |  |  |    |
|  | Reason(s) for filing (Check proper box) New Well Change in Transporter of: Other (Please explain) |   |  |  |    |
|  | Recompletion Change in Ownership  | Oil Dry<br>Casinghead Gas Cor                   | A Gas Change of open<br>Andensate Note: This is  | rating name  |    |
| · . 1  | If change of ownership give name<br>and address of previous owner                                 | Pennzoil United, Inc                            | <u>- P. O. Drawer 1828 - M</u>   |  |    |
| п.   | DESCRIPTION OF WELL ANI   | D LEASE   | •  |  |    |
|  | Western State   | Well No. Pool Name, Including<br>5 Maljamar Gra | yburg-San Andres State, Federa   | Ledse No.  |    |
|  | Unit Letter B : 6   | 560 Feet From The North                         | Line and 1980 Feet From  | The East   |    |
| l  | Line of Section 20 T  | ownship 17-S Range                              | <u>33-е</u> , ммрм, L  | ea County  |    |
| 11. j  | DESIGNATION OF TRANSPOR   | TER OF OIL AND NATURAL                          | GAS  |  |    |
| i  | None  |   | Address (Give address to which appro<br>Address (Give address to which appro   |  |    |
|  | None<br>If well produces oil or liquids,  | Unit Sec. Twp. P.ge.                            |  |  |    |
| Ľ  | give location of tanks.   |   |  |  |    |
| יי<br>א. ע<br>ר  | COMPLETION DATA   | ith that from any other lease or poo            |  |  |    |
|  | Designate Type of Completi  |   | New Well Workover Deepen   | Plug Back Same Res'v. Diff. Res'v.                                     |    |
|  | Date Spuddod  | Date Compl. Ready to Prod.                      | Total Depth  | P.B.T.D.   |    |
| ľ  | Elevations (DF, RKB, RT, GR, etc.)  | Name of Producing Formation                     | Top Cil/Gas Pay  | Tubing Depth   |    |
| I  | Perforations  | - <b>I</b>                                      |  | Depth Casing Shoe  |    |
| È  |   | TUBING, CASING, AN                              | ND CEMENTING RECORD  |  |    |
| E  | HOLE SIZE   | CASING & TUBING SIZE                            | DEPTH SET  | SACKS CEMENT   |    |
| -  |   |   |  |  |    |
| Ē  |   |   |  | ·  |    |
| 0  | EST DATA AND REQUEST F<br>IL WELL   | able for this a                                 | after recovery of sotal volume of load oil a<br>lepth or be for full 24 hours)   | . A •  |    |
| Ľ  | ate First New Oil Run To Tanks  | Date of Test                                    | Producing Method (Flow, pump, gas lift   | i, etc.)   |    |
| L  | ength of Test   | Tubing Prossure                                 | Casing Pressure  | Choke Size   |    |
| ~  | ctual Prod. During Test   | Oti-Bbis.                                       | Water-Bbls.  | Gas • MCF  |    |
| _ لـــ<br>م  |   | I   |  |  |    |
|  | AS WELL<br>ctual Prod. Test-MCF/D   | Length of Test                                  | Bbls. Condensate/MMCF  | Gravity of Condensate  |    |
| T  | esting Mothed (pitot, back pr.)   | Tubing Pressure (Shut-in)                       | Casing Pressure (Shut-in)  | Choke Size   |    |
| . CI   | ERTIFICATE OF COMPLIANC   | E<br>CE   | OIL CONSERVAT  | TION COMMISSION  |    |
| I hereby certify that the rules and regulations of the Oil Conservation<br>Commission have been complied with and that the information given<br>above is true and complete to the best of my knowledge and belief. |   |   | APPROVEDJUL 24 1972  |  |    |
|  |   |   | Orig, Signed by  |  |    |
|  |   |   | TITLE Joe D. Runny,<br>Dist. I, Supv.  |  |    |
|  |   |   | This form is to be filed in compliance with RULE 1104.<br>If this is a request for allowable for a newly drilled or deepened<br>well, this form must be accompanied by a tabulation of the deviation<br>tests taken on the well in accordance with RULE 111.   |  |    |
|  |   |   |  |  |    |
|  |   |   | •  | 7-19-72<br>(Dat  | <) |
| •  |   |   | And a state of the |  |    |



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