HO		1		
DISTRIBUTION				
SANTA FE				
FILE				
U.S.G.S.		I		
LAND OFFICE				
FRANSPORTER	OIL			
	GAS			
OPERATOR				
PRORATION OFFICE				

į	DISTRIBUTION SANTA FE FILE		ONSERVATION COMMISSION FOR ALLOWABLE AND	Form C-104 Supersedes Old C-104 and C-11 Effective 1-1-65		
	U.S.G.S.	AUTHORIZATION TO TRA	NSPORT OIL AND NATURAL G	AS		
	LAND OFFICE					
	TRANSPORTER GAS					
	OPERATOR					
ı.	PRORATION OFFICE					
	V-F Petroleum					
	Address 1212 Vaughn Building, Midland, Texas 79701					
	Reason(s) for filing (Check proper box)	Change in Transporter of:	Other (Please explain) change of lease n	ame from F. J. Danglade		
	Recompletion X.	Oil X Dry Gas	to Danglade Gas U	nit effective November		
	Change in Ownership	Casinghead Gas 🔀 Condens	sate X 1, 1971			
	If change of ownership give name	THIS WELL HAS BEEN PLACE	TO IN THE BOOK			
	and address of previous owner	DESIGNATED BELOW. IF YOU	DO NOT CONCUP			
II.	NOTIFY THIS OFFICE.					
	Lease Name Danglade Gas Com	1 Townsend (Atoles	n-Morrow) Kind of Lease State, Federal	F00 1		
	Location					
	Unit Letter J : 1,98	BO Feet From The East Line	e and 1,980 Feet From T	he South		
			35-E , ммрм, Lea			
	Line of Section 15 Tow	mship 16-S Range	3.5-E 1.14mi mi 11ca			
III.	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GAS	S Address (Give address to which approv	ed conv of this form is to be sent)		
	Name of Authorized Transporter of Oil Texas-New Mexico Pipeli	or Condensate 🙀	P. O. Box 1510, Midland	1, Texas 79701		
	Name of Authorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which approx		ed copy of this form is to be sent)			
	Northern Natural Gas Co	ompany	401 Wall Towers West, M	iidland, Texas 79701		
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Pge. J 15 16-\$ 35-E	Is gas actually connected? Whe			
	If this production is commingled wit	h that from any other lease or pool,	give commingling order number:			
	COMPLETION DATA	Oll Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.		
	Designate Type of Completio		X	P.B.T.D.		
	Date Spudded 11-17-71	Date Compl. Ready to Prod. 1-4-72	Total Depth 12,978	11,472'		
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth 11,330'		
	3987 GL Atoka Sand		11,416'	Depth Casing Shoe		
	Perforations 11,417-11,435'					
	,	TUBING, CASING, AND	CEMENTING RECORD			
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
	17-1/4"	13-3/8"	325' 4.710'	2000		
	12-1/4"	9-5/8"	12.978	500.		
	8-3/4"	2-3/8"	11.330	On Packer		
v.	TEST DATA AND REQUEST FO	OP ALLOWARTE (Test must be at	fter recovery of total volume of load oil	and must be equal to or exceed top allow		
• •	TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL Date First New Oil Run To Tanks Date of Test (Test must be after recovery of total volume of load oil and must be equal to or exceed top allow able for this depth or be for full 24 hours) Producing Method (Flow, pump, gas lift, etc.)					
	Date First New Oil Mail 10 10112			Choke Size		
	Length of Test	Tubing Pressure	Casing Pressure	Chore Size		
	Actual Prod. During Test	Cil-Bbis.	Water-Bbls.	Gas • MCF		
	Actual Prod. During 1001					
	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate		
		4 hours	72	62.6		
	15,200 MCF/D AOF Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size Various		
	Back Pressure	3461	Packer	TION COMMISSION		
VI.	CERTIFICATE OF COMPLIANCE		MAR	ZU 1912		
	I hereby certify that the rules and regulations of the Oil Conservation		. 19			
	Commission have been complied to	ommission have been complied with and that the information given bove is true and complete to the best of my knowledge and hetter,		BY John Runyan Geologist		
	Spoke is time sun combiete to me					
			11	compliance with RULE 1104.		
	Mallatte Try			wahla for a nawly drilled or deepens		
	- Sign	atwel.	well, this form must be accompa	rdence with RULE 111.		
	J. M. Fullinwider	Co-owner	All sections of this form must be filled out completely for allo			

(Title)

(Date)

January 4, 1972

All sections of this form must be filled out completely for allow able 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