"NO. OF COPIES RECEIVED MEXICO OIL CONSERVATION COMMISSION DISTRIBUTION Form C -104 Supersedes Old C-104 and C-110 SANTA FE REQUEST FOR ALLOWABLE Effective 1-1-65 AND FILE AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS U.S.G.S. LAND OFFICE OIL IRANSPORTER GAS OPERATOR PRORATION OFFICE perator Gas Producing Enterprises, Inc. P.O. Box 235, Midland, Texas 79702 Other (Please explain) Reason(s) for filing (Check proper how) Thange in Transporter of: Сd . Dry Gas Henompletion Condensate Justingheurt Gas thange in Ownership 🗓 Colorado Oil Company, Inc., P.O. Box 235, Midland, Texas 79702 and address of previous owner ____ Colorado Oil Company, Inc., P.O. Box 235, Midland, Texas 79702 DESCRIPTION OF WELL AND LEASE Lease 10, | Rell No. | Fool Name, Including Formitten Saunders Permo Penn, South xxxxxxxx State 1P301533 Feet From The <u>East</u> 660 Feet From The South Line and 660 P Unit Letter____ , NMEM, Township 15-S Range 33-E 30 Lea Line of Section DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Cil X or Condensate 2300 Continental Nat'l Bank Bldg. Ft. Worth, T Amoco Pipeline Company Name of Authorized Transporter of Casinghead Gas X or try Gas None Is gas actually connected? When Ser (wr. | Rge. if well produces oil or liquids, 30 15-S 33-E No P give location of tanks. If this production is commingled with that from any other lease or pool, give commingling order number Segment | Har Fork | Same Resty, Diff. Resty COMPLETION DATA Tall Well Gas Well Hew Well Designate Type of Completion -(X)P.B.T.D. Date Compl. Rendy to Prod. Total Depth Date Spudded Tubing Depth Top Cil. Gas Pay Name of Producing Formation Elevations (DF, RKB, RT, GR, etc.) Depth Casing Shoe Perforations TUBING, CASING, AND CEMENTING RECORD SACKS CEMENT DEPTH SET CASING & TUBING SIZE HOLE SIZE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours) TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL Producing Method (Flow, pump, gas lift, etc.) Date First New Cil Run To Tanks Date of Test Choke Size Casing Pressure Tubing Pressure Length of Test Gan-MCF Water - Bble. Oll - Bbls. Actual Prod. During Test **GAS WELL** Gravity of Condensate Bbls. Condensate/MMCF Actual Prod. Test-MCF/D Length of Test Choke Size Casing Pressure Testing Method (pitot, back pr.) Tubing Fressure OIL CONSERVATION COMMISSION CERTIFICATE OF COMPLIANCE

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.

District Production Superintendent

(Title)

(Date)

H. E. Clarke

12-29-77

Cunty

76102

APPROVED -City Signed by BY____

TITLE .

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened 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 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.

JAN 1 1978

OIL CONCERVATION COMPANDERS, N. W.