١	N. UF -128 RECEIVED	_	_				
	DISTRIBUTION	W MEXICO OIL	CONSERVATION COMMISSIO	Form C-104			
	SANTA FE	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-11			
	FILE			Effective 1-1-65			
	U.S.G.S.	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS					
	LAND OFFICE						
	TRANSPORTER GAS						
	OPERATOR						
1.	PRORATION OFFICE						
	Apexco, Inc.						
	P. 0. Box 2299, Tulsa Shlabona 74101						
	Reason(s) for filing (Check proper box) Other (Please explain)						
	New Well	Change in Transporter of:					
	Recompletion	Osl Dry G	as Operator Name Ch	ange			
	Change in Ownership	Casinghead Gas Conde	ensate′				
	If change of ownership give name and address of previous owner	Apache Corp	oration, I. O. Dox 2299,	Tulsa Oklahoma 74101			
11.	DESCRIPTION OF WELL AND	LEASE Well No. Pool Name, Including I	Formation Kind of Lea	se Lease No.			
	Lease Name			alor Fee State G-5489			
	Maljamar North Unit	West Remitte	TROWGE WOLL CHIMP	00.07			
	Unit Letter E : 2180 Feet From The North Line and 660 Feet From The West						
	Line of Section 31 T	ownship 163 Range	33E , _{NMPM} , I	ea County			
•••	PROTON ARTON OF TRANSPOL	TED OF OH AND NATURAL C	AS				
11.	Name of Authorized Transporter of O	RTER OF OIL AND NATURAL G	Address (Give address to which appro	oved copy of this form is to be sent)			
			P. O. Box 1183, Houst	on. Texas			
	The Permian Corporation Name of Authorized Transporter of Casinghead Sas or Dry Sas			Address (Give address to which approved copy of this form is to be sent)			
	Phillips Potroleum Company Unit Sec. Twp. Age.		Phillips 11/g., Bartlesville. Oklahoma				
	If well produces oil or liquids, give location of tanks. G 31 168 23E Yes 1/5/65						
		with that from any other lease or pool	, give commingling order number:	lot Applicable			
IV.	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Restv. Diff. Restv.			
	Designate Type of Complet	ion = (X)	1	i i			
	Date Spudded	Date Compl. Ready to Prod.	: Total Depth	P.B.T.D.			
	Sale Spanso		•				
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth			
	, , , , , , , , , , , , , , , , , , , ,						
	Perforations			Depth Casing Shoe			
	TUBING, CASING, AND CEMENTING RECORD						
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT			
				3			
v.	TEST DATA AND REQUEST	FOR ALLOWABLE (Test must be able for this c	after recovery of total volume of load oil	l and must be equal to or exceed top allow			
	OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas	lift, etc.)			
			· · · · · · · · · · · · · · · · · · ·				
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size			
	Actual Prod. During Test	Oil-Bhis.	Water - Bbls.	Gas-MOF			
				<u></u>			
	GAS WELL	Langth of Test	Bbls. Condensate/MMCF	Gravity of Condensate			
	Actual Prod. Test-MCF/D	Length of Test					
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size			

VI. CERTIFICATE OF COMPLIANCE

Tom R. Jerome

July 3, 1973

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.

(Signature)

(Title)

(Date)

Regional Production Administrator

Condensate OIL CONSERVATION COMMISSION APPROVED_ Orig. Signed by Joe D. Ramey Dist. I, Supv. 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 allowable 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.

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