	SU NO COMES PEC	Livis	
	DISTRIBUTIO		
	SANTA FE		
	FILE		
	u.s.g.s.		
	LAND OFFICE		
	IRANSPORTER	OIL	
	HANSFORIER	GAS	
	OPERATOR		
1	PRORATION OF		
	Operator		

•	DISTRIBUTION SANTA FE FILE U.S.G.S. LAND OFFICE TRANSPORTER OIL GAS OPERATOR PROPATION OFFICE TRANSPORT OFFICE PROPATION OFFICE TRANSPORTER OIL GAS OPERATOR PROPATION OFFICE TRANSPORT OIL CONSERVATION COMMISSIV FORM C-104 Supersedes Old C-104 and Effective 1-1-65 AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS PROPATION OFFICE						
•	Operator	Pennzoil Company					
	Address	D. O. Dunicou 1006	O Midland Toyac 707	0.1			
	Reason(s) for filing (Check proper box, New Well Recompletion Change in Ownership			·			
	If change of ownership give name and address of previous owner	Pennzoil United, Inc.	- P. O. Drawer 1828 - M	idland, Texas 79701			
II.	DESCRIPTION OF WELL AND	LEASE Well No. Pool Name, including F	ormation Kind of Leas	se Lease No.			
	Aztec State	1 Lovington Pe	enn Northeast State, Feder	1 - 1			
	Unit Letter J; 198	Feet From The South Lin	ne and 1980 Feet From	The <u>East</u>			
	Line of Section 18 Tow	vnship 16-S Range	37-E , ммрм, I	Lea County			
III.	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA Or Condensate	AS Address (Give address to which appro	oved copy of this form is to be sent)			
	Texas-New Mexic Name of Authorized Transporter of Cas	co Pipe Line Co.	P. O. Box 1510 - Midla Address (Give address to which appro				
	Phillips Petrol	eum Company	Phillips Bldg., Bartle				
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. J 18 16-S 37-E	Is gas actually connected? What Yes	July, 1968			
	If this production is commingled wit COMPLETION DATA	th that from any other lease or pool,					
	Designate Type of Completio	on - (X) Gas Well	New Well Workover Deepen	Plug Back Same Restv. Diff. Restv.			
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.			
	Elevations (DF, RKB, RT, GR, etc.,	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth			
	Perforations	<u> </u>	<u> </u>	Depth Casing Shoe			
		TUBING, CASING, AND	CEMENTING RECORD				
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT			
	TEST DATA AND REQUEST FO	OR ALLOWABLE (Test must be af	fter recovery of total volume of load oil pth or be for full 24 hours)	and must be equal to or exceed top allow-			
İ	OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)				
ļ	Length of Test	Tubing Pressure	Casing Pressure	Choke Size			
	Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	Gas-MCF			
I,				<u></u>			
ſ	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate			
-	Teating Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size			
I.	CERTIFICATE OF COMPLIANC	CE .	OIL CONSERVATION COMMISSION				
3	hereby certify that the rules and regulations of the Oil Conservation commission have been complied with and that the information given		[]	101972, 19.			
	above is true and complete to the	best of my knowledge and belief.	BY	Joe D. Ramey			
	1 1 (γ_{0}	TITLE Dist. I, Supv This form is to be filed in compliance with RULE 1104.				
-	Say S.	Johnson	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				
	Office Manager	rwej					
-	Titl	(e)					
-	July 14, 1972 (Dat	:e)					
	The second secon		completed wells.				

140. 07 COFIET ALC	į		
กามผลาขอ		l —	
SANTA FE			
FILE			
11.S.G.S.		i	
LAND OFF CE	LAND OFF CE		
TRANSPORTER	OIL		
TRANSFORTER	GAS		
OPERATOR			
PROBATION OF			
Operator			
Pe	nnzoi	1 U1	nit
Address			

REQUEST FOR ALLOWABLE Point G-104 Supersedes Old G-104 and G

	FILE U.S.G.S. LAND OFFICE IRANSPORTER OIL GAS OPERATOR	AUTHORIZ.\Y		AMD	COMABLE	NATURAL G	Eff	ersecus (un ontive 1-1-05	C-104 ank C-1]
1.	PRORATION OFFICE Operator								
	Pennzoil United, Inc.								
	P. O. Drawer 1828 - Midland, Texas Reason(s) for filing (Check proper box)			79701 Other (Please explain)					
	New Well Recompletion	Change in Transpo	7						
	Change in Ownership	Casinghead Gas 2	Dry Go Conde	=					
	If change of ewnership give name and address of previous owner								
11.	DESCRIPTION OF WELL AND					T			
	Lease Name Aztec-State	Well No. Pool Nam	ington Pe		thoaat	Kind of Lease State, Federal	_	ate	OG-4765
	Location					4			00 4703
	Unit Letter J; 19	80 Feet From The	South Lin	ne and	1980	Feet From T	he <u>Ea</u>	st	
	Line of Section 18 Tov	waship 16-S	Range	37-E	, NMPN	. Le	a		County
Ш.	DESIGNATION OF TRANSPORT		ATURAL GA	S					
	Name of Authorized Transporter of Oil			1		to which approv		•	·
	Texas-New Mexico Pipe Name of Authorized Transporter of Cas		y Gas 🗔	Address	Give address	- Midland to which approv	. Texas	/9/() 1 s form is to	be sent)
	Phillips Petroleum Com		p. P.ge.	Phill:	ips Bldg.	- Birtle		0kla.	74004
	If well produces oil or liquids, give location of tanks.	, ,	-S 37-E	is gas ac	Yes	ed? Whe		- 1968	} }
	If this production is commingled wit	th that from any other, l							
	Designate Type of Completion		Gas Well	New Well	Workover	Deepen	Plug Back	Same Hesi	v. Diff. Restv.
	Date Spudded	Date Compl. Ready to P	rod.	Total Der	th	<u> </u>	P.B.T.D.		-
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Form	nation	Top O!1/0	Gas Pay		Tubing Dept	h	
	Perforations		···	<u> </u>			Depth Casin	g Shoe	
	HOLE SIZE	TUBING, CASING, AND CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
}									
l				 					
	TEST DATA AND REQUEST FO	OR ALLOWABLE	Test must be aj able for this de			me of load oil a }	nd must be eq	ual to or ex	ceed top allow-
Ī	Date First New Oil Run To Tanks	Date of Test		Producing	Mathod (Flow	, pump, gas lift	, etc.)		
	Length of Test	Tubing Pressure		Casing Pi	essure	· · · · · · · · · · · · · · · · · · ·	Choke Size		
	Actual Pred. During Test	Oil-Bbls.		Water - Bb	is.		Gcs-MCF		
l.									
_	GAS WELL								
	Actual Prod. Test-MCF/D	Length of Test		Bbls. Con	densate/MMCI		Gravity of Co	ondensate	
}	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-	·in)	Casing Pr	ensure (Shut-	-in)	Choke Size		
VI.	CERTIFICATE OF COMPLIANCE I hereby certify that the rules and regulations of the Oil Conservation		OIL CONSERVATION COMMISSION						
,			APPRO	VED	OCT 18	1971		9	
	Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.			Or's, Signed by					
				TITLE Dist. I, Supv.					
	Office Manager (Title)			1		be filed in co		th RULE	1104.
				If this is a request for allowable for a newly drilled or despene well, this form must be accompanied by a tabulation of the deviation			or despened		
				tests taken on the weil in accordance with RULE 111. All sections of this form must be filled out completely for silowable on new and recompleted wells.					
-									
October 14, 1971 (Date)			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						

Separate Forms C-104 must be filed for each pool in multiply

THE ED

(1 1871

OIL COUSED TO A SAME