`	SANTA FE FILE U.S.G.S. LAND OFFICE	REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OF AND		Form C-104 Superseder Old C-104 and C-110 Effective 1-1-65 - GAS
1.	IRANSPORTER OIL   GAS GAS   OPERATOR PRORATION OFFICE   Operator Operator			
	Address	Pennzoil Company		
•	Reason(s) for filing (Check proper ba New Well	P. O. Drawer 1828 -	Midland, Texas 79701 Other (Please explain)	
	Recompletion		Gas	rating name
	If change of ownership give name and address of previous owner	Pennzoil United, Inc.	- P. O. Drawer 1828 - M	
п.	DESCRIPTION OF WELL AND	LEASE		
•	State Sale	Well No. Pool Name, Including 1 Vacuum Lower	Wolfcamp North State, Fede	Lease No.
	Unit Letter M = 7(	56 Feet From The South	ine and554Feet From	n TheWest
		wnship 16-S Range	34-Е , ММРМ,	Lea County
III.	DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS     Name of Authorized Transporter of Oil I or Condensate     Address (Give address to which approved copy of this form is to be sent)			
	Mobil Oil Corporati Name of Authorized Transporter of Car	ON singhead Gas 🗶 or Dry Gas 🦲	P. O. Box 900 - Dalla	
	Phillips Petroleum	Company	Phillips Bldg., Bartl	esville, Oklahoma 74004
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. F.ge. M 35 16-S 34-E	Is gas actually connected? W	When purchased from state
1 IV. (	I this production is commingled with COMPLETION DATA	th that from any other lease or pool,		when purchased from state
ſ	Designate Type of Completic	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.
·	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
ł	Perforations			Depth Casing Shoe
		TUBING CASING AN	D CEMENTING RECORD	
F	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
E				
·  -				· · · · · · · · · · · · · · · · · · ·
C	EST DATA AND REQUEST FOR ALLOWABLE (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)			
	Date First New Oil Bun To Tanks	Date of Test	Producing Method (Flow, pump, gas li	<i>ft, etc.)</i>
Ī	Length of Test	Tubing Pressure	Casing Pressure	Choke Size
[	Actual Prod. During Test	Oll-Bble.	Wates-Bbls.	Gas - MCF
6	AS WELL		· · · · · · · · · · · · · · · · · · ·	
	and a second	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
-	Cesting Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
/1. C	ERTIFICATE OF COMPLIANC	E	OIL CONSERVA	TION COMMISSION
I	I hereby certify that the rules and regulations of the Oil Conservation		APPROVED 101 24 1972 19	
C	ommission have been complied wi ove is true and complete to the	th and that the information given	BY Orig. Signed by Joe D. Ramey	
	•		TITLE 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 allow-	
-	(Signati	we)		
•	Office Manager			
7-20-72			able on new and recompleted wolls. Fill out only Sections I, II, III, and VI for changes of owner,	
•	(Date	)	well name or number, or transport	er, or other such change of condition be filed for each pool in multiply



RECEIVED

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