, NO. OF COPIES REC	IVED	i	
DISTRIBUTION			
SANTA FE			
F.LE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PRORATION OFFICE			

## 1EW MEXICO OIL CONSERVATION COMMISS

orm C-104 spersedes Old C-104 and C-110 fective 1-1-65	

	SANTA FE	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-110 Effective 1-1-65			
	F.LE		AND				
	U.S.G.S.	AUTHORIZATION TO TRA	NSPURT UIL AND NATUR	AL GAS			
	OIL	-					
	TRANSPORTER GAS						
	OPERATOR	4					
I.	PRORATION OFFICE Operator	<u> </u>					
	Major, Giebel	& Forster					
	Address						
		ding, Midland, Texas 79					
	Reason(s) for filing (Check proper box	Change in Transporter of:	OCASING HEAD	GAS MUST NOT BE			
	New Well Recompletion	Oil Dry Ga	s FLARED AFTI	EXCEPTION TO R-1070			
	Change in Ownership	Casinghead Gas Conden	1 1 1				
	If change of ownership give name and address of previous owner						
	DESCRIPTION OF WELL AND	DESIGNATED BELOW. IF LEASE NOTIFY THIS OFFICE.	YOU DO NOT CONCUE				
11.	DESCRIPTION OF WELL AND Lease Name	Well No. Pool Name, Including Fo	ormation Kind of	i			
	Mobil State Com	1 Shoe Bar Eas	State, F	ederal or Fee State K-1440			
	Location		///	That			
	Unit Letter P; 66	Feet From The South Lin	e and <u>DDU</u> Feet	From The <u>East</u>			
	Line of Section 30 To	wnship 16-S Range	36-E , NMPM,	Lea County			
	Line of Section 0 0						
III.	DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL GA	S	approved copy of this form is to be sent)			
	Name of Authorized Transporter of Oi						
	Admiral Crude Oil Co	rporation singhead Gas or Dry Gas	Box 1345, Midland, Text display the display of Dry Gas Address (Give address to which approximately				
	Name of Administration						
	If well produces oil or liquids,	Unit Sec. Twp. P.ge.	Is gas actually connected?	When			
	give location of tanks.	P 30 16-S 36-E		Waiting on connection			
	If this production is commingled wi	ith that from any other lease or pool,	give commingling order number	:			
IV.	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deep	en Plug Back Same Res'v. Diff. Res'v.			
	Designate Type of Completi	on $-(X)$ X	X				
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.			
	May 15, 1971 Elevations (DF, RKB, RT, GR, etc.)	Tuly 15, 1971	12,962	Tubing Depth			
	Elevations (DF, RKB, RT, GR, etc.) 3944 KB	Name of Producing Formation  Devonian	Top Oil/Gas Pay 12,915	12,900			
	9944 ND Perforations	Devoman	12,310	Depth Casing Shoe			
	Open I	Hole		12,915			
			CEMENTING RECORD				
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT			
	15	11-3/4	445	400 sx			
	7-7/8	5-1/2	12.915	300 sx			
		2-3/8	12,900				
V.	TEST DATA AND REQUEST F	FOR ALLOWABLE (Test must be a	fter recovery of total volume of loepth or be for full 24 hours)	ad oil 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,				
	July 15, 1971	Tuly 17, 1971					
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size			
	24	105 psi	Packer	22/64			
	Actual Prod. During Test	Oil-Bbis.	Marter - Spra.	87.7			
	283	283	<u> </u>	0/./			
	GAS WELL						
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate			
			Casing Pressure (Shut-in)	Choke Size			
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Cusing 1 1000 Est Comment				
	CERTIFICATE OF COMPLIAN	NCF	OIL CONSE	ERVATION COMMISSION			
VI	. CERTIFICATE OF COMPLIAN	ICE	APPROVED JUL 22 1971 . 19				
	I hereby certify that the rules and	regulations of the Oil Conservation					
	Commission have been complied	with and that the information given he best of my knowledge and belief.	DRY Sesles	By Leslie Villemente			
above is title and complete to me open as my		OIL & CAS VISPECTOR					
	$f_{i}$		TITLE				
	· · · · · · · · · · · · · · · · · · ·	7 200	This form is to be filed in compliance with RULE 1104.  If this is a request for allowable for a newly drilled or despended				
(Signature) Engineer			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.				
						(Tile) July 20, 1971	
	(1	Date)					
						completed wells.	

## RECEIVED

JUL 3 11971

OIL CONSERVATION COMM.
HODES, N. I...