· 11	BTATE OF NEW MEXICO INGY AND MINERALS DEPARTMENT	ATION DIVISION DX 2000 M MIXICO 07501		Form C-104 Revised 10-1-78	
7.	IANTA FE SANTA FE, NEW MEXICO 07501 FILE				
	C & K Petroleum, Inc. Address P. O. Drawer 3546, Midland, TX 79702 Resson(s) for filing (CAeck proper box) New Well Description Cit Dry Gas Change in Ownership Casinghead Gas Condensate				
	f change of ownership give rame and address of previous owner				
11.	DESCRIPTION OF WELL AND Lease Name Shipp "34" Location	Well No. Pool Name, Including 7 1 West Knowles,	Drinkard	Kind of Lease Stale, Federal	or F Fee
	Unit Letter <u>K</u> ; 1980 Line of Section 34 T		ne and <u>1980</u> 37-Е , NMPM,	_Feet From T Lea	he West County
() 1.	DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GA Nome of Authorized Transporter of Cil Condensate Getty Trading and Transportation Company Name of Authorized Transporter of Casinghead Gas or Dry Gas		S Address (Give address to which approved copy of this form is to be sent) P.O. Box 1142, Midland, Texas 79702 Address (Give address to which approved copy of this form is to be sent) 500 W. Illinois, Midland, TX 79701		
	Tipperary Corporation If well produces oil or liquids,	Unit Sec. Twp. Rge. K 34 16S 37E	Is gas actually connected? When		
	give location of tarks. If this production is commingled wit	1 data	give commingling order	number:	
:√.	COMPLETION DATA Designate Type of Completion	on - (X) Oil Well Gas Well	New Well Workover	Deepen	Plug Back Same Restv. Dill, 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				Depth Casing Shoe
	HOLE SIZE	TUBING, CASING, AND CASING & TUBING SIZE	D CEMENTING RECORD		SACKS CEMENT
				e of load oil o	i ind must be equal to or exceed top allow
۲.	TEST DATA AND REQUEST FO	pith or be for full 24 hours) [Producing Method (Flow.			
		Date of Test Tubing Pressure	Casing Pressure		Choke Size
	Longth of Tost Actual Prod. During Tost	C11-5016.	Walet-Bble.		Gas - MCF
				<u> </u>	
	GAS WELL	Length of Test	Bbis. Condensate/AMCF		Gravity of Concensate
	Teeting biethod (pitot, back pr.)	Tubing Pressure (shut-in)	Caeling Pressure (Ebat-	10)	Choke Size
					I ION DIVISION
	CERTIFICATE OF COMPLIANCE I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		APPROVED JAN 13-1983		
			JERRY SEXTON		
	Administrative Supervis	TITLE DISTRICT 1 SUPR. This form is to be filed in compliance with BULE 1193. If this is a request for allowable for a newly drilled or despanse. Well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with BULE 111. All sections of this form must be filled out completely for allow able on new and encompleted wells.			
January 11, 1983 (Dute)			Fill out only Sections 1, 11, 31, and VI for changes of condition well name or musicer, or transporter, or other such change of condition beparate Forms C-103 must be filted for each pool in multiple conditions.		