NO OF COPIES RECT	EIVEO	i	
DISTRIBUTION			
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			L
IRANSPORTER	OIL		
	GAS	Ĺ	
OPERATOR			
PROPATION OFFICE			l

NEW MEXICO OIL CONSERVATION COM-

Form C-104 Supersedes Old C-104 and C-11

1	SANTAFE		UR ALLUWABLE	Effective 1-1-65			
-	FILE		AND	A.C.			
	U.S.G.S.	AUTHORIZATION TO TRAN	ISPORT OIL AND NATURAL GA	43			
	LAND OFFICE						
	TRANSPORTER OIL						
ļ	GAS						
	OPERATOR						
1.	PRORATION OFFICE						
	Western Oil Pr	oducers Inc.					
	Mestern orr rr	Oddectio, Inc.	e.				
	P.O. Box 2055	Roswell, New Mexico	88201				
	Reason(s) for filing (Check proper box)	ROBWETT, NOW ITEME	Other (Please explain)				
. '	New Well X	Change in Transporter of:					
	Recompletion	Oil Dry Gas					
	Change in Ownership	Casinghead Gas Condens	sate 🔲				
	Ca.qo O		, , ,				
	If change of ownership give name		R-5754				
	and address of previous owner	You 1.	-the h-)			
**	DESCRIPTION OF WELL AND I	EASE Malfan	na work su	Lease No.			
44.	Lease Name	Mett Mo. Loot teamel merchand	1. A 4.32 T T	T			
	Amoco State	1 Maljamar Pe	State, Federal	or Foo State K-6666			
	Location			••			
	M . 66	Feet From The South Line	and 660 Feet From T	he West			
	Unit Letter;						
	Line of Section 28 Tow	nship 16S Range	33-E , NMPM, L	ea County			
111	DESIGNATION OF TRANSPORT	ER OF OIL AND NATURAL GAS	Address (Give address to which approv	ed come of this form is to be sent)			
	Name of Authorized Transporter of Oil	or Condensate	H20.655 0100 220.02				
	Amoco Production Tr	ruck	P.O. Box 1183 Hous	ton, Texas //UU1			
	Name of Anthorized Transporter of Caston Continental Oil Co.	inghead Gas 🔀 or Dry Gas 🔀	Address (Give address to which approx P.O. Box 2197 Houst	on Texas 77001			
	Natural Gas Pipelin	o co of America	P.U. BOX Z30 TITUIA	III, IEAAS ////			
	Natural Gas Pipelii	Unit Sec. Twp. P.ge.	Is gas actually connected? Whe				
	If well produces oil or liquids, give location of tanks.	M 28 16S 33E	No	March 1977			
		h that from any other lease or pool,	give commingling order number:				
***	If this production is commingled wit	n that from any other lease of poor,		Land Back Diff Back			
IV.	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v			
	Designate Type of Completion	n - (X)	X	<u> </u>			
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.			
	10/31/76	2/28/77	13,635'	13,595			
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth			
	GR 4218	Atoka Penn	12,997'	12,930			
	Perforations			Depth Casing Shoe			
	243 shots/ft. 1:	2,997'-13,0 <u>03' total</u>	14 shots	13,635			
	TUBING, CASING, AND CEMENTING RECO						
	101 5 6175	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT			
	HOLE SIZE 17岁"	13 3/8"	4 904'	400 sx. circ.			
	11"	8 5/8"	4440'	250 sx			
	7 7/8"	5½"	13635'	750 sx 🖘			
		2 3/8"	12930'	<u>i </u>			
		53 CSg. 1 2 370					
V	. TEST DATA AND REQUEST F	oble for this de	oth or be jor juli 24 nours))				
	OII. WELL Date First New Oil Run To Tanks Date of Test Producing Method (Flow, pump, gas lift, etc.)						
	Date First New Oil Name to Famous						
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size			
	Length of 14st						
	Actual Prod. During Test	Oil-Bbis.	Water-Bbis.	Gas-MCF			
	Actual Plot. Duling 1001						
	GAS WELL						
	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate			
	2780	4 hrs. (240 min.)	1/8.654	46			
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size			
	Meter run	3579	0-Pkr.	Meter run			
			OLCONSERV	ATION COMMISSION			
V	I. CERTIFICATE OF COMPLIAN	ICE	T (新建物) (2) (2) (2)	er a grand and			
		A standard Committee	APPROVED	, 19			
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given		Lesson & lesson					
	Commission have been complied with and that the best of my knowledge and belief.		BY.				
			SUPERVISOR DISTRICT				
	Van Leure		TITLE				
			This form is to be filed in	compliance with RULE 1104.			
			If this is a request for allowable for a newly drilled or deepen well, this form must be accompanied by a tabulation of the deviati				
	(Sig	nature)	II AADAM ON THE WELL III BUU	Oldenda week to an a			
	5		Att mentions of this form D	aust be filled out completely for mile			
	(Title)		able on new and recompleted	wells.			

Fill out only Sections I. H. III, and VI for changes of owner well name or number, or transporter, or other such change of conditions. Fill out only Sections I. II. III. and VI for changes of owns well name or number, or transporter, or other such change of condition Separate Forms C-104 must be filed for each pool in multiple completed wells.

FI TED

1 1977

LOGBS, N. M.