NO. OF COPIES REC	EIVED	i	
DISTRIBUTIO			
SANTA FE			
FILE			
U.\$.G.\$.	l		
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PRORATION OF		1	

CANTAEE			-			ONSERVATION COMMI	ISSION	Form C-104 Supersedes Old	C-104 and C-110
SANTA FE			$\dashv$	KE	MOE21 L	FOR ALLOWABLE AND	•	Effective 1-1-6	
			$\dashv$	4 UTUODI 7 4 TIONI 5	TO TO A	NSPORT OIL AND N	IATUDAL C	A C	
U.S.G.S.				AUTHURIZATION	IU IRAI	NSPURT UIL AND P	NATURAL G	AS	
EAND OFFICE	OIL		$\dashv$						
TRANSPORTER	GAS								
OPERATOR	<u> </u>		$\dashv$						
PRORATION OF	ICE		$\dashv$						
Operator	,,,,	1							
W. A. Mo	ncrie	f.	Jr.						
Address									
Moncrief	Bui	1 <b>d</b> 1	ng,	Ninth at Commerce	, Fort	Worth, Texas	76102		
Reason(s) for filing						Other (Please			
New Well				Change in Transporter of	l:				
Recompletion	X			Oil	Dry Gas	· <b> </b>			
Change in Ownership	<u> </u>			Casinghead Gas	Condens	sate			
				Thing has a second	3				
If change of owners and address of prev			. <del></del>	DESIMATIO	15 BEEN <del>AM AW H</del>	PLACED IN THE POOR YOU DO NOT CONC	<u> L</u>		
•				MOTIFY THIS	OFFICE.	TOO DO MOT COMC	UR		
DESCRIPTION O	F WEL	L A	ND I		·	emation 0 1 all	Kind of Lease	<del> </del>	Lease No.
Lease Name						1-260	State, Federal	P	1
State				l Kemmitz	Lower	Wolfcamp	0,	State State	L E 9538
Location	_		100	10 X	_1_	661		. Hoot	
Unit Letter	<u> </u>	;	198	O Feet From The Nort	<u>In</u> Line	and <u>661</u>	Feet From Ti	he West	
	26		_	160 B	3	OT NIMON	Too		County
Line of Section	26		Tow	mship 16S R	ange 3	3E , NMPM	Lea		
	A	NO.	0 D 7	CED OF OUL AND NATE	DAT GA	2			
Name of Authorized	Transpor	ter of	OKI	OF Condensate	KAL UA	Address (Give address )	to which approve	ed copy of this form is t	o be sent)
1						Box 1183, Hou	ston. Texa	as 77001	
The Peri	Transcor	OID	OFA Cas	inghead Gas X or Dry Ga	s , ,	Address (Give address	to which approve	ed copy of this form is t	o be sent)
1				ser.		P. O. Box 219	7, Houston	n, Texas 77001	
Continer			Com	Unit Sec. Twp.	P.ge.	Is gas actually connecte			
If well produces oil give location of tan		•,		E 26 16S	33E	Yes	į	6-16-77	ļ
·		•		<u> </u>	07 2001	rive commingling order	r number:		
If this production i		ngled	I Wit	h that from any other lease	or poor, [	Stae committeding order			
					as Well	New Well Workover	Deepen	Plug Back   Same Res	stv. Diff. Restv.
Designate Ty	pe of C	ompi	etio	n - (X)	į			X	: X
Date Spudded				Date Compl. Ready to Prod.		Total Depth		P.B.T.D.	
12-1-76				9-15-77		15,000'		10,888'	
Elevations (DF, RK	B, RT, G	R, et		Name of Producing Formation	a	Top Oil/Gas Pay		Tubing Depth	
4186 GD	4204	K.B	ś	Kemnitz Lower Wo	lfcamp	10,770'		10,367'	
Perforations								Depth Casing Shoe	
10,770-	10,774	·';	10	,780-10,786'; 10				12,097'	
						CEMENTING RECOR		T	
	SIZE			CASING & TUBING	SIZE	DEPTH \$	ET	SACKS CEN	
16"				13-3/8"		376'		374 Class "	
11½				8-5/8"		4505'	1	850 2 stag	
7-7	/8''			5½"		12,097		700 Class "	н. —
1				2-7/8"		10,367		1	
TEST DATA AN	D REQ	UES	r F	OR ALLOWABLE (Test	must be of	ter recovery of total volu pth or be for full 24 hours	ime of load oil a	and must be equal to or	exceed top allow-
OIL WELL				Date of Test	jor this de	Producing Method (Flow		i. etc.)	
Date First New Oil		dnks				_		•	İ
9-12-	//			9-15-77 Tubing Pressure		Pump Casing Pressure		Choke Size	
Length of Test									
24 ho				Oil-Bbls.		Water - Bbls.		Gas - MCF	
				219		None		623	
219 B	<u> </u>			217		None			
GAS WELL									
Actual Prod. Test-	MCF/D			Length of Test		Bbls. Condensate/MMC	F	Gravity of Condensate	,
1				,					
Testing Method (pil	ot, back	pr.)		Tubing Pressure (Shut-in)	,	Casing Pressure (Shut	-in)	Choke Size	
								<u> </u>	
CERTIFICATE	OF CO	4PI	IANI	CIE		OIL	CONSERVA	TION COMMISSIO	N
CERTIFICATE	or con		12 84 4 4		1		SEP 1	9 1977	
I hereby contify th	at the e	.100	and r	regulations of the Oil Cons	ervation	APPROYED	7		, 19
Commission have	heen co	ilamı	ed w	vith and that the informati	ou given	as ( lasha	a sul.	Junian	
above is true and	comple	to to	, the	best of my knowledge an	o Dellei.	BY	Geologi	0	
						TITLE	CONTRAT	Prisi.	
i.						This form is t	o be filed in c	compliance with RUL	E 1104.
A	~ 0						west for allow	able for a newly dril	led or deepened
Dewey E.	4		MA (Size	otwe)		I this form must	it he accompai	nied by a tabulation	Of file Geaterion
EXPLORAT IO	MANA	CE P	- / <b>-</b> /***			tests taken on the	well in accor	dence with RULE 11 at be filled out comp	11.
TWI DOMEST TO			<u>-                                      </u>			II All sections 0	I ture folds man	ar na swian ant naut.	,

(Title)

(Date)

SEPTEMBER 16, 1977

tests taken on the well in accord 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

CI COMPANIAN COMM.