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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS 1966

Form O-1104
U.S. Supersedes Old O-104 and O-110
Effective 1-1-65

Company	
Trebol Drilling Company	
Address	
P. O. Box 3986, Odessa, Texas 79760	
Reasons for filing (Check proper box)	
New Well	Change in Transporter
Recompletion	Oil
Change in Ownership	Casinghead Gas
	Other

If change of ownership give name and address of previous owner Southern New Mexico Oil Corporation
P. O. Box 1659, Midland, Texas

DESCRIPTION OF WELL AND LEASE	
Lease Name	Well No.
Lusk Deep Unit	6 Lusk Strawn
Location	Kind of Lease
Unit Letter M ; 660 Feet From The South ; 660 Feet From The West	XXX Federal XXX
Range of Section 19 ; Township 19S ; Range 32E ; Lea County	

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS	
Name of Authorized Transporter of Oil X or Condensate	Address (Give address to which approved copy of this form is to be sent)
The Permian Corporation	P. O. Box 3119, Midland, Texas 79704
Name of Authorized Transporter of Casinghead Gas X or Dry Gas	Address (Give address to which approved copy of this form is to be sent)
Phillips Petroleum Company	Phillips Building, Odessa, Texas 79760
Does well produce oil or liquids? Unit Sec. Twp. Rge.	Is gas actually connected? When
Yes location of tanks. LACT B 19 19S 32E	Yes At Completion

If this production is commingled with that from any other lease or pool, give commingling order number: --

COMPLETION DATA	
Designate Type of Completion - (X)	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.S.T.D.
Pool	Name of Producing Formation Top Oil Was Pay Tubing Depth
Perforations	Depth Casing Shoe
TUBING, CASING, AND CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE DEPTH SET SACKS CEMENT

TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth - be for full 24 hours)	
Date First New Oil Run To Tanks	Date of Test Producing Method (Flow, pump, gas lift, etc.)
Length of Test	Tubing Pressure Casing Pressure Choke Size
Actual Prod. During Test	Oil-Bbls. Water-Bbls. Gas-MCF

GAS WELL	
Actual Prod. Test-MCF/D	Length of Test Bbls. Condensate/MMCF Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure Casing Pressure Choke Size

CERTIFICATE OF COMPLIANCE	OIL CONSERVATION COMMISSION
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.	APPROVED BY DATE 8/25/66
W. C. Schmitt Drilling and Production Superintendent August 25, 1966	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 logs 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 Sections I, II, III, and VI only for changes of owner, well name or number, or transporter or other such change of condition.