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

## REQUEST FOR ALLOWABLE

AUTHORIZATION TO TRANSHORT OIL AND NATURAL GAS

Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65

TRANSPORTER GAS				
OPERATOR				
PRORATION OFFICE				
Operator				
	United, Inc.			
Address	1999 Midland Tou	20701		
Reason(s) for filing (Check proper box)	wer 1828 - Midland, Tex	as 7970] Other (Please explain)		
New Well	Change in Transporter of:	Office (1 tease explain)		
Recompletion	Oil Dry Gar	s		
Change in Cwnership	Casinghead Gas Conden	sate Change of open	rating name	
If change of ownership give name and address of previous owner	Pennzoil Company - P.	0. Drawer 1828 - Midlan	d, Texas 79701	
. DESCRIPTION OF WELL AND I	Well No. Pool Name, Including Fo	ormation   Kind of Leas	Lease No.	
Lease Name				
Huston	2 Bishop Canyon	-Sail Andres	ree   N-2321	
	080 Feet From The North Lin	1989	The Fast	
Unit Letter ;	Feet From The Lin	e and Feet From	The	
Line of Section 9 Tow	nship 18-5 Range	38-E , NMPM,	Lea County	
i. <u>DESIGNATION OF TRANSPORT</u>	ER OF OIL AND NATURAL GA	Address (Give address to which appro	and some of this form is to be sent!	
Name of Authorized Transporter of Oil				
The Permian Corporat Name of Authorized Transporter of Cas	inghead Gas K or Dry Gas	P. O. Box 3119 - Midland, Texas 79701  Address (Give address to which approved copy of this form is to be sent)		
Phillips Petroleum (		Bartlesville, Oklahoma		
	Unit Sec. Twp. Rge.		nen	
If well produces oil or liquids, give location of tanks.	H 9 18-S 38-E	Yes	12-4-63	
If this production is commingled wit	h that from any other lease or pool.	give commingling order number:		
COMPLETION DATA				
Designate Type of Completio	Oil Well Gas Well	New Well   Workover   Deepen	Plug Back   Same Res'v. Diff. Res'v.	
Designate Type of Completio	<u>, , , , l , , , , ,</u>			
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
Flourities - (DE BVD DT CD	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
Elevations (DF, RKB, RT, GR, etc.)	Name of Ploadering 1 of marion	100 011/ 042 1 - 7		
Perforations			Depth Casing Shoe	
	TUBING, CASING, AND	CEMENTING RECORD		
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
	D ATTOWART COMMEN	for a second sec	l and must be equal to or exceed top allow	
V. TEST DATA AND REQUEST FO	able for this de	epth or be for full 24 hours)	t and must be equal to or exceed top association	
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas l	ift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
		Manage Phila	Gas - MCF	
Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	Gra-Mor	
GAS WELL				
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in) Choke Size		
I. CERTIFICATE OF COMPLIAN	CE		ATION COMMISSION	
JUN 27 1000		271968		
I hereby certify that the rules and	regulations of the Oil Conservation	71 710 440	, 13	
Commission have been complied w	with and that the information given best of my knowledge and belief.	BY DE	May	

This form is to be filed in compliance with RULE 1104.

Z.IPERV 601

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 tests taken on the well in accordance with RULE 111.

DUSTANCT

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

completed wells.

(Signature)

(Title)

(Date)

Manager of Production

June 21, 1968