

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

Operator \_\_\_\_\_  
 Address Texas Pacific Oil Company Inc.  
P. O. Box 4067, Midland, Texas 79701  
 Reason(s) for filing (Check proper box) \_\_\_\_\_ Other (Please explain) \_\_\_\_\_  
 New Well ☐ \_\_\_\_\_  
 Recompletion ☐ \_\_\_\_\_  
 Change in Ownership ☐ \_\_\_\_\_  
 To dispose of 459 bbls test oil

Lease Name	State AF 3 Vacuum Wolfcamp East	Kind of Lease	State	Lease No.
Location	Unit Letter L 1980	Feet From The	South	990
Line of Section	8	Township	18-S	Range
			35-E	County

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
<b>The Permian Corporation</b>	<b>P. O. Box 1183, Houston, Texas 77001</b>
Name of Authorized Transporter of Gas <input type="checkbox"/> <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks.	Is gas being subjected? When

COMPLETION DATA									
Designate Type of Completion - (1)		Drill Well	Test Well	Flow Well	Workover	Deepen	Plug Back	Same Res'tv.	Diff. Res'tv.
Date Spudded	Date	Time	Ready to Prod.	Tubing Depth			P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation			Top of Gas Layer			Tubing Depth		
Perforations							Depth Casing Shoe		
<b>TUBING, CASING, AND CEMENTING RECORD</b>									
HOLE SIZE	CASING & TUBING SIZE			DEPTH SET			SACKS CEMENT		

Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be (or full 24 hours)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Flowing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - BBL.	Water - BBL.	Gas - MCF

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

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.

W. J. McClinton - 27  
(Signature)  
District Superintendent  
(Title)  
8-2-76  
(Date)

APPROVED \_\_\_\_\_, 19\_\_\_\_  
 BY \_\_\_\_\_  
 TITLE \_\_\_\_\_

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 tests 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 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.