		1_	ı
SA TA FE			
FIE			
G.S.			
D OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PRORATION OF			

m.

IV.

Testing Method (pitot, back pr.)

Tubing Pressure (Shut-in)

## NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE

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

<del>-</del>	<del></del>	<del>_</del>	AND		Effect	live 1-1-65
G.S.		AUTHORIZATION TO T	RANSPORT OIL ALIA			
D OFFICE			MANDEUK I UIL AND	NATURAL	GA5	
TRANSPORTER OH	-					
GA	5	7				
OPERATOR	1					
PRORATION OFFICE		7				
Operator					·	
Devon Energy	Corno	ration				
Address	COLPO	ration				
1500 Mid-Amo						
Reason(s) for filing (Chec	rica T	ower, 20 North Broa	dway, Oklahom	a Citv.	OK 7310	2
New Well	k proper 603		Other (Plea	se explain)	7310	
Recompletion		Change in Transporter of:				
		Oil XX Dry	Gas			
Change in Ownership		Casinghead Gas Con	densate			
If change of ownership g	ive name		······································			
and address of previous	owner					
•	<u></u> _				<del></del>	
DESCRIPTION OF WE	LL AND	LEASE				
Lease Name		Well No. Pool Name, Including	Formation	Kind of Lea	se	<del></del>
State		2 Leamex, Pac		State, Feder	ed as Fac	Legse No.
Location			140CK	D. C. C. F BUE!	Sta	te B-2516
Unit Letter 0	. 6	560 E-48 - COURT	0700			•
Our Patrai	_ <i>i</i> `	560 Feet From The South	ine and 2130	Feet From	The East	
Line of Section 22	Tax	wnship 17S Bange	2.2-			
22	101	wnship 17S Range	33E , NMPI	4. Lea	<u>1</u>	County
DESIGNATION OF TR	ANGROR					
Name of Authorized Transp	ANSPUR	TER OF OIL AND NATURAL G				
1		11.11	Address (Give address	to which appro	oved copy of this f	form is to be sent)
Western Curde	<u> </u>	Inc.				
		singhead Gas v or Dry Gas	P. O. Box 1] Address (Give address	to which appro	oved copy of this f	(as /9702
Phillips Petr	oleum		10 WW. Frank			
If well produces oil or liqu	ids,	Unit Sec. Twp. Fige.	is gas actually connect	ed? W	.ps brug.,	
give location of tanks.		0 22 17S 33E	Yes	1	Cambrida	Okl
If this production is comm	ingled wit	th that from any other lease or pool			September	19/6
COMPLETION DATA			, give commingling orde	r number:		
Denienata Tura -6.0	 ^1	Oil Well Gas Well	New Well Workover	Deepen.	Plug Back So	me Res'v. Diff. Res'v
Designate Type of	∽ompletio	on — (A)		1	1 - any Duck So	me Resty. DIII, Hesty
Date Spudded		Date Compl. Ready to Prod.	Total Depth	<del></del>	DETE	
		1			P.B.T.D.	
Elevations (DF, RKB, RT,	GR, etc.;	Name of Producing Formation	Top Oil, Gas Pay		<del> </del>	
	,		TOP SIL, Gas Pay		Tubing Depth	
Perforations					1	
					Depth Casing S	hoe
<del> </del>		<b></b>				
11A1 P 21			D CEMENTING RECOR	D		
HOLE SIZE		CASING & TUBING SIZE	DEPTH SE	ET	SACK	S CEMENT
<del></del>						· · · · · · · · · · · · · · · · · · ·
<u> </u>				<del></del>	1	
					+	
TEST DATA AND REQ	UEST FO	R ALLOWABLE (Test must be	after recovery of ental and			
OIL WELL		able for this d	after recovery of total volu epth or be for full 24 hours	me oj load oil: )	and must be equal	to or exceed top allow
Date First New Oil Run To	Tanks	Date of Test	Producing Method (Flow		(i. etc.)	
			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		,	
Length of Test		Tubing Pressure	Casing Pressure		Chara Sta	
	ĺ	-	Assemb Liggeria		Choke Size	•
Actual Prod. During Test		Oil-Bbis.	Warran Fall			<u> </u>
	ļ		Water - Bbls.		Gas-MCF	
SAC WELL						
GAS WELL Actual Prod. Test-MCF/D						
	,	Length of Test	Bbis. Condensate/MMCF		Gravity of Conde	

Casing Fressure (Shut-in)

Choke Size