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LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PROMOTION OFFICE	
Operator	

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-1-78

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Mid-America Petroleum, Inc.
Address
P. O. Box 2515, Midland, Texas 79702

Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well	<input checked="" type="checkbox"/>	Change in Transporter of:	
Recompletion	<input type="checkbox"/>	Oil	<input type="checkbox"/>
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>
		Dry Gas	<input type="checkbox"/>
		Condensate	<input type="checkbox"/>

If change of ownership give name and address of previous owner

DESCRIPTION OF WELL AND LEASE			
Lease Name	Well No.	Pool Name, including Formation	Kind of Lease
New Mexico "A" State	1	East La Rica Morrow	State
Location			State, Federal or Fee
			Lease No. LG 3425
Unit Letter	Q	660 Feet From The South	Line and 2080 Feet From The East
Line of Section	35	To Township 18S	Range 34E
			N.M.P.M.
			Lea
			County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS			
Name of Authorized Transporter of Oil	<input type="checkbox"/>	or Condensate	<input checked="" type="checkbox"/>
The Permian Corporation			
Address (Give address to which approved copy of this form is to be sent)			
P. O. Box 1183, Houston, TX 77001			
Name of Authorized Transporter of Casinghead Gas	<input type="checkbox"/>	or Dry Gas	<input checked="" type="checkbox"/>
Lano Inc.			
Address (Give address to which approved copy of this form is to be sent)			
P. O. Box 1320, Hobbs, New Mexico 88240			
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.
	0	35	18S
			Rge. 34E
Is gas actually connected?	No	When	Within 45 days

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
		X	X
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
8-13-81	2-15-82	13,618	13,400
Elevations (DF, RAB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
3976' GR 3988 KB	Morrow	13,238	13,050
Perforations	13,238 - 13,250 (13 holes)		Depth Casing Shoe
			NA

TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17-1/2"	13-3/8	520	500
11"	8-5/8"	4400	220 Lite + 250 Cl. C
7-7/8"	5-1/2"	13,618'	1100 Cl. H


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 oil able for this depth or 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
2880	4 Hrs.	52.8	49.9
Testing Method (pilot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size
back pressure	2050	packer	6/64-8/64-6/64

CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.


(Signature)
Engineering Assistant
(Title)
March 3, 1982
(Date)

OIL CONSERVATION DIVISION	
APPROVED	APR 17 1982
BY	ORIGINAL SIGNATURE
	JERRY SE...
TITLE	DISTRICT MANAGER

This form is to be filed in compliance with RULE 1001.
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviate 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.

RECEIVED

MAR - 4 1982

CHIEF
HOBBY OFFICE