| DISTRIBUTION | | | |
|---|--|--|---|
| SANTA FE | NEW MEXICO OIL CONSERVATION COMMISSION | | Form C-104 |
| FILL | REQUEST FOR ALLOWABLE Supersedes Old C-104 and C AND Effective 1-1-65 | | |
| U.S.G.5. | AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS | | |
| LAND OFFICE | | | |
| IRANSPORTER GAS | | | |
| PROPATION OFFICE | | | |
| Operato: | | | |
| Crown Central Pe | etroleum Corporation | | |
| 1010 Bank of the Record(s) for thing (Check proper | e Southwest Bldg., Ho | Ouston, Texas 77002 Other (Please explain) | |
| New Well | Change in Transporter of: | | |
| Recompletion | | Gas | |
| Change in C+ Arship[X] | | densate | |
| If change of ownership give nam and address of previous owner_ | Sunset Internation 2400 Fidelity Unio | al Petroleum Corpon n Tower, Dallas, Te | ration exas 75201 |
| II. DESCRIPTION OF WELL AN | D LEASE Well No. Pool Name, Including | | |
| Shell State 5-72 | | Formation Kind of I burg San Andres ^{tate, Fe} | Lease No. |
| Location Unit Letter D ; | 990 N | 990 | rom The |
| Line of Section 20 | Township 175 Range | | |
| | | ······································ | Lea County |
| II. DESIGNATION OF TRANSPO Name of Authorized Transporter of | OII X or Condensate | Address (Give address to which a | pproved copy of this form is to be sent) |
| Texas-New Mexico | | | Aidland, Texas 79701 |
| Name of Authorized Transporter of Casinghead Gas 🗶 or Dry Gas 🗔 | | Address (Give address to which approved copy of this form is to be sent) | |
| Phillips Petroleum | | Bartlesville, Oklahoma | |
| If well produces cil or liquida, give location of tanks. | Unti Sea, Twp. P.ge. | Is gas actually connected? | When |
| If this production is commingled V. COMPLETION DATA | with that from any other lease or pool | l, give commingling order number: | ······································ |
| Designate Type of Comple | tion - (X) | New Well Workover Deepen | Plug Back Same Res'v. Diff. Res'v |
| Date Spudded | Date Compl. Ready to Prod. | Total Depth | P.B.T.D. |
| Elevations (DF, RKB, RT, GR, etc. |) Name of Producing Formation | Top Oil/Gas Pay | Tubing Depth |
| Perforations | | | Depth Casing Shoe |
| · · · · · · · · · · · · · · · · · · · | | | |
| NOL 5 5175 | | ND CEMENTING RECORD | |
| HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT |
| | | | |
| | | | |
| V. TEST DATA AND REQUEST | | after recovery of total volume of load | oil and must be equal to or exceed top allou |
| OIL WEIL Date First New Cil Run To Tanka | Date of Test | depth or be for full 24 hours) Producing Method (Flow, pump, ga | s lift, etc.) |
| Lengta of Test | Tubing Pressure | Casing Pressure | Choke Size |
| | | | |
| Actual Pros. During Test | Oil-Bbls. | Water-Bble, | Gas-MCF |
| GAS HE. | | | |
| Actual Prov. Conte WOF/D | Length of Test | Bbls. Condensate/MMCF | Gravity of Condensate |
| Tearing Worksz (pilor, back pri) | Tubing Pressure (Shut-in) | Casing Pressure (Shut-in) | Choke Size |
| L. CERTIFICATE OF COMPLIA | | | VATION COMMISSION |
| i obviti totili or oomi bin | | | 1 5 1071 |
| Commission user over complied | d regulations of the Oil Conservation with and that the information given | | , 19 |
| above is this and complete to t | he best of my knowledge and belief. | BY Han U. | Junyan |
| Λ | | TITLE | ologist |
| H. R. Sho | | This form is to be filed | in compliance with RULE 1104. |
| 11. 11. AND | mpen | If this is a request for al | llowable for a newly drilled or deepened |
| (Si | (natur) | well, this form must be accor tests taken on the well in ac | npanied by a tabulation of the deviation cordance with RULE 111. |

Agent (Tiule)

This form is to be filed in complete with ROLL from. 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 allow-the on accompleted with



OIL CONSERVATION COMMI. NJEBO, L. M.