## NO. OF COPIES RECEIVED DISTRIBUTION NEW MEXICO OIL CONSERVATION COMMISSION SANTA FE Supersedes Old C-104 and C-110 REQUEST FOR ALLOWABLE Effective 1-1-85 AND u.s.g.s. AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS LAND OFFICE OIL TRANSPORTER I GAS OPERATOR PRORATION OFFICE per ut-MONSANTO COMPANY : ::r\*-101 North Marienfeld, Midland, Texas 79701 Reason(s) for filing (Check proper box) eres na vetra Dismijheni Jus tomberic whereast\_ If change of ownership give name and address of previous owner .... II. DESCRIPTION OF WELL AND LEASE Undesignated Gual Ridge Romas Property or Fee DON STATE 1 R-3435 1980 660 North West 16 **19**S 34E Lea , Township III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be sent) ithorized Transporter of Cil 🟋

The Permian Corporation

Designate Type of Completion = (X)

None

IV. COMPLETION DATA

lorte Epocited

OIL WELL
Teste First New (

Leath of Test 24

**GAS WELL** 

2-17-68

Astual Proc. During Test

45 bbls

A thal Froi. Test-MOFA:

Terrin r Method (pitot, back pr.)

VI. CERTIFICATE OF COMPLIANCE

12-11-67

Undesignated

15

10-5/8"

7-7/8"

If well profunes of or liquids, give to rather of tanks.

ci Autilorizea Transporter of Casinghead Gas 🚞

Unit

C

33 holes 10,037-70° and 20 holes 10,100-115°

Sec.

16

If this production is commingled with that from any other lease or pool, give commingling order number:

X

3-26-68

Bone Springs

CASING & TUBING SIZE

Sate Compl. Ready to Frail.

Name of Producing Formation

11-3/4"

8-5/8"

4-1/2"

4-9-68

25

Tubing Fressire

Length of Test

Tubina Pressure

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.

Dist. Prod. Supt.

April 10, 1968

(Title)

ČII Well

198

Rge.

34E

-QIL CONSERVATION COMMISSION

Chake Size

State

First Edok - Same Restv. Diff. Restv.

10,215'

10,006

10,251'

SACKS CEMENT

325

425

200

14.35

revity of Condensate

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

P. O. Box 3119, Midland, Texas 79701

is gas actually connected? When

10,260'

10,0371

4321

Fro inding Method (Flow, pump, gas lift, etc.)

Pump - Kobe

load

Pkr

Fbls. Condensate AMACE

Casing Fressure

TITLE \_

4125'

10,251'

New Well Workover Deepen

No

X

TUBING, CASING, AND CEMENTING RECORD

V. TEST DATA AND REQUEST FOR ALLOWABLE (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 for full 24 hours)

Casing Pressure

Water-Bbls. 20

Aircess (Give address to which approved copy of this form is to be sent)

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 Sections I, II, III, and VI only 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