STATE OF NEW MEXICU RGY IND MINERALS DEPARTMENT	- MINERALS DEPARTMENT			Form C-1 Revised	
** ** ***********	TL CONSERVA				
CILLININUTION SANTA 78 FILE	P. O. BOX 2088 SANTA FE, NEW MEXICO 87501				
	REQUEST FOR ALLOWABLE				
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS					
PROBATION OFFICE					
<u>C. LEMCÓ</u>			·		
Reoson(s) for filing (Check proper box,	h College /	VIC X Other (Please e	<u>7570:</u>) xplain)	<u></u>	
New Well	Change in Transporter of:	-	-	r from Vernon	Ε.
Recompletion Change in Ownership X	Casinghead Gas Condens	Faulcone	r 		
If change of ownership give name and address of previous owner	Vernon E. Faulconer, 1100	<u>Peoples Bank Bu</u>	ilding, I	<u>Yler, Texas</u>	75702
DESCRIPTION OF WELL AND	LEASE				
Leose Name	Well No. Pool Name, Including Formation Kind of Les		(ind of Lease State, Føderal		
Mattie Price	6 West Garrett	(Devonian) [<u>ree</u>	
Unit Letter G;3]	GFeet From The East Line	and <u>1820</u>	Feet From TI	North	
Line of Section 6 To	mship 17S Range	38E , NMPM,	Lea	·····	County
DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL GAS	S Address (Give address io	which approve	d copy of this form is	to be sentj
Nome of Authorized Transporter of Cil Shut-in					
Name of Authorized Transporter of Cas	singhead Gas or Dry Gas	Address (Give address to	which approve	ed copy of this form is	to be sent)
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge.	is gas actually connected? When I			
If this production is commingled wi COMPLETION DATA	th that from any other lease or pool, g	zive commingling order : New Well Workover	number:	Plug Back / Same Fi	esty. Diff. Resty.
Designate Type of Completio	on - (X)			1 1 1 1	i i i
Dote Spudded	Date Compl. Ready to Prod.	Total Depth		P.B.T.D.	!
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation		Top Otl/Gas Pay T		Tubing Depth	
Perforations	<u></u>			Depth Casing Shoe	
	TUBING, CASING, AND	CEMENTING RECORD		SACKS CE	MENT
HOLE SIZE	CASING & TUBING SIZE				
		 		1	
		l			i i
TEST DATA AND REQUEST F	able for this de	(ter recovery of total volum pth or be for full 24 hours) Producing Method (Flow,			
Date First New Oil Run To Tanks	Date of Test	Producing Kischol (1.104)	, , , , , , , , , , , , , , , , , , ,		
Length of Test	Tubing Pressure	Casing Pressure		Choke Size	
Actual Prod. During Test	OII-BEIS.	Water - Bbls.		Gas • MCF	
		: <u></u>	·····		
GAS WELL Actual Prod. Teet-MCF/D	Length of Test	Bbla. Condensate/MMCF	· · · · · · · · · · · · · · · · · · ·	Gravity of Condensa	11•
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-	in)	Choke Size	
CERTIFICATE OF COMPLIAN	CE		NSERVAT		•
hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given bove is true and complete to the best of my knowledge and belief.		APPROVED			
		BYJERRY SEXTON			
P. Al Para	. t		ant for allow	compliance with RU vable for a newly dr	illed or deepened
Isin Sin	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.				
Englice a G	<u>((2010,CAN</u>	able on new and rec	completed 🕶	st be filled out com ilis.	
5 6 5.4	Datej	Fill out only S well name or number	Sections 1, 1 , or transport	l. III, and VI for cluer, or other such chi	inge of condition
14	//	Separate Formi	• C-104 mu∎	t be filed for each	pool in multiply

RECEIVED

ų. L

MAY 1 () read

O.C.D. HOBBS OFFICE