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1	SANTA FE				
	FILE				
Ì	U.S.G.S.				
	LAND OFFICE				
	IRANSPORTER	OIL			
	THANS! ON EN	GAS			
	OPERATOR				
	PRORATION OFFICE				

SANTA FE FILE		1	ONSERVATION COMMISSION FOR ALLOWABLE AND	Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65				
u.s.g.s.		AUTHORIZATION TO TRA	NSPORT OIL AND NATURAL (GAS				
LAND OFFICE								
IRANSPORTER	AS AS							
OPERATOR								
1. PRORATION OFFIC	ē	<u> </u>						
Cperator								
Address	nion Oil Company of California							
	P. O. Box 671 - Midland, Texas 79702							
	s) for filing (Check proper box) Other (Please explain) Change in Transporter of: Casinghead gas connection made 9:30 A.M.							
New Well Recompletion	d been shut in since it							
Change in Ownership	j	Casinghead Gas Conden	sate was completed in	March, 1979.				
If change of ownership	give name							
and address of previou								
II. DESCRIPTION OF WELL AND LEASE								
Lease Name		Well No. Pool Name, Including Fo						
Pipeline "16"	State	1 Quail Ridge Bo	one Spring State, Federa	State L-2949				
Unit Letter G	, 1980	Feet From The North Line	e and 1980 Feet From	The East				
Unit Letter	; 1700	reet from the HOLDIT CHI	e dn1reet Flom	200				
Line of Section	16 Tov	wnship 19 South Range 3	34 East , NMPM, L	ea County				
TI DESIGNATION OF	TD ANSDAD'	TER OF OIL AND NATURAL GA	c					
Name of Authorized Tra		X or Condensate	Address (Give address to which appro	ved copy of this form is to be sent)				
The Permian Co	rporation	Permian (E.) singhead Gas X or Dry Gas	P. O. Box 1183 - H	ouston, Texas 77001				
į			Address (Give address to which appro					
Phillips Petro		Unit Sec. Twp. Ege.	4001 Penbrook - O Is gas actually connected? Wh	dessa, Texas 79762				
If well produces oil or l give location of tanks.	Idniqs'	G 16 19-S 34-E		ug. 27, 1979				
If this production is co	ommingled wi	th that from any other lease or pool,	give commingling order number:					
V. COMPLETION DAT		Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Resty. Diff. Resty.				
Designate Type	of Completic	$\operatorname{on} - (X)$						
Date Spudded		Date Compl. Ready to Prod.	Total Depth	P.B.T.D.				
Elevations (DF, RKB, F	T CD	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth				
Lievations (DF, KKB, F	.1, GR, etc.,	Maine of Producing 1 Station	lop on our ray	. az my Septii				
Perforations	erforations entertains			Depth Casing Shoe				
HOLE SI		CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT				
HOLE SI		GRAING & FORTH O SIZE	527,11,521					
V. TEST DATA AND I	FOUEST F	OR ALLOWARIE. (Test must be a	fter recovery of total volume of load oil	and must be equal to or exceed top allow-				
OIL WELL		able for this de	pth or be for full 24 hours)					
Date First New Oil Run	To Tanks	Date of Test	Producing Method (Flow, pump, gas l	iji, etc.)				
Length of Test		Tubing Pressure	Casing Pressure	Cheke Size				
			,					
Actual Prod. During Te	st	Oil-Bbis.	Water-Bbls.	Gas-MCF				
		L	1					
GAS WELL								
Actual Prod. Test-MC	F/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate				
Testing Method (pitot,	hask no l	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Chcke Size				
resting Method (phot,	pack priy	. abing , too but (blace - In)	odding i robbard (on to	0.0020				
VI. CERTIFICATE OF	COMPLIAN	CE	OIL CONSERVA	ATION COMMISSION				
			Chr	193				
I hereby certify that t	he rules and	regulations of the Oil Conservation with and that the information given	APPROVED Orig. Sigued by					
above is true and co	above is true and complete to the best of my knowledge and belief.			BY Jerry Sexton				
			Djst 1, Supv.					
0 - M	7/1		This form is to be filed in	compliance with RULE 1104.				
R. T. Sh	my	R. T. Shurtleff	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 only Sections I. II. III. and VI for changes of owner,					
District Prod		perintendent (ile)						
Sept	ember 6,							
		ate)	well name or number, or transpor	tten or other such change of condition. at he filed for each pool in multiply				
			Separate Borma C+104 mul	at he title for each post in muliphy				