	0.510 m 0.1 0.9 0.510 m 0.1 0.9 1Am 1 A 7 2 7 1.6 0.6 0.7 7 1.2 7 LAMD OF 7 1.2 7	P.O. SANTA FE, N	VATION DIVIS ON DOX 2000 EW MEXICO 8750:	Revised 10-1-75	
3.					
	Superior Oil Company, The				
	P.O. BOX 3901, Midl Feason(s) for filing (Check proper box, Now Well Recompletion Charge in O-nership	Change in Transporter of: Cil Dr	Application allowable.	for 2000 barrel test	
	If change of ownership give name and address of previous owner				
i.	DESCRIPTION OF WELL AND I Mescalero Ridge C Locallon Unit Letter <u>N</u> ; 21	1 Scharb -	Dana Canita	deral or Fee Fee	
		vnship 195 Range	35Е , мери, Lea		
1	DESIGNATION OF TRANSPORT				
	Nome of Authorized Transporter of Oil Koch Oil Company of Nome of Authorized Transporter of Cas Phillips Petroleum	Texas	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1558, Breckenridge, TX 76024 Address (Give address to which approved copy of this form is to be sent) Frank Phillips Bldg. (5-4B) Bartlesville, OK Is gas actually connected?		
	If well produces oil or liquida, give location of tanks. If this production is commingled with that from any other lease or pool, give commingling order number:				
	COMPLETION DATA	Oil Well Gas Wel	-	Plug Boox Same Hestv. Dill. Rost	
	Designate Type of Completio	n - (X) Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oll/Gas Pay	Tubing Depth	
	Perforations			Depth Casing Shoe	
	TUBING, CASING, AND CEMENTING RECORD				
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
<i>,</i>	TEST DATA AND REQUEST FO) BALLOWABLE (Test musi b	e ofter recovery of total volume of load	i oil and must be equal to or exceed top allo	
•	OIL WELL cole for this depi		e depth or be for full 24 hours) Producting ktothod (Flow, pump, go		
	Length of Test	Tubing Pressure	Caring Pressure	Choze Size.	
	Actual Prod. During Text	011-551.	Water - Bbla.	Gos-MCF	
ļ					
	GAS WELL Actual Frod. 7 MCF/D	Longin of Teel	Bbla. Condenacte/ABACF	Gravity of Condeneale	
	Tooling Wolfed (pilot, back pr.)	Tubing Fissews (Bhut-in)	Coaing Pressure (Shut-in)	Chok• Siz•	
•	CERTIFICATE OF COMPLIANC		DIL CONSERVATION DIVISION APPROVED NOV 3 () 1984		
	I hereby certify that the rules and regulations of the Oli Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		ORIGINAL S	BYBYBYBYSERVISOR	
Division Operations Superintendent (Tule) 11-27-84			If this is a request for a well, this form must be accor- tests taken on the well in a All encirens of this form able on new and recompleted	TITLE This form is to be filed in compliance with MULE 1104. If this is a request for allowable for a newly drilled or deepen well, this form must be accompanied by a tabulation of the deviati tests taken on the well in accordance with AULE 111. All sections of this form must be filled out completely for allo able on new and recompleted wells. Fill out only Sections 1. II. III, and VI for changes of own- well name or number or transported to the reach change of condition for some formation with the filed for sech point in multiple	
			well name or number of trans		



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