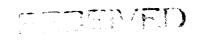
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DISTRIBUTIO			
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PRORATION OF			
Operator			
MADDIO	D IN	T/~	

	DISTRIBUTION	NEW MEXICO OIL CO	IL CONSERVATION COMMISSION		Form C-104	Form C-104							
	SANTA FE	1. 1				Supersedes Old C-104 and C-110 Effective 1-1-65							
i	FILE	Fliective 1-1-											
	U.S.G.S.	AUTHORIZATION TO TRA	NSPORT OIL AND	NATURAL G	AS								
	LAND OFFICE												
	OIL												
	TRANSPORTER GAS												
	OPERATOR			•									
	PRORATION OFFICE	1											
I.	Operator				<del></del>								
	WARRIOR, INC.												
	Address												
125 Midland Tower Bldg., Midland, Texas 79701  Reason(s) for filing (Check proper box)  Other (Please explain)													
	Reason(s) for filing (Check proper box)		Other (Pleas	e explain)									
	New Well	Change in Transporter of:	·			İ							
	Recompletion	Oil Dry Gas	· 📙 /		the state of								
	Change in Ownership	Casinghead Gas $X$ Conden											
	If change of ownership give name												
	and address of previous owner												
	DESCRIPTION OF WELL AND	UP ACE											
11.	DESCRIPTION OF WELL AND	Well No. Pool Name, Including Fo	ormation	Kind of Lease		Lease No.							
	State WE "G" Gas C		State, Federal	or Fee State	B-11298								
		om 1 Eumont Que	CII/ Cas	] 0.0.0, 1 0.0.1.	5000   5 11-70								
	Location												
	Unit Letter H : 1980	Feet From The North Line	e and 660	Feet From T	he East								
					•	]							
	Line of Section 34 Tow	mship 20-S Range	36-E , NMPN	<u>.,                                    </u>	_ea	County							
Y T	DESIGNATION OF TO ANSPORT	TER OF OIL AND NATURAL GA	S										
11.	Name of Authorized Transporter of Oil	or Condensate	Address (Give address	to which approv	ed copy of this form is	to be sent)							
				-	•								
	None	inghead Gas or Dry Gas X	: Address (Give address	to which approv	ed conv of this form is	to be sent)							
	Name of Authorized Transporter of Cas		Address (Give address to which approved copy of this form is to be sent)  Bartlesville, Oklahoma										
	Phillips Petroleun				<del></del>								
	If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connect	ed? Whe	'n								
	give location of tanks.	1 1 1	Yes										
	and the second suite	h that from any other lease or pool,	give commingling orde	r number:									
		n that from any other rease or poor,	give comminging orde										
. ¥ .	COMPLETION DATA		New Well Workover	Deepen	Plug Back   Same Re	es'v. Diff. Res'v.							
	Designate Type of Completion	on = (X)	! ! !	1	i '								
		Date Compl. Ready to Prod.	Total Depth		P.B.T.D.								
	Date Spudded	Date Compl. Heady to 110d.											
		Top Oil/Gas Pay		Tubing Depth									
	Elevations (DF, RKB, RT, GR, etc.)			l abing Depth									
					D. 1) C-11- Cha								
	Perforations				Depth Casing Shoe								
					<u> </u>								
		TUBING, CASING, AND	CEMENTING RECORD										
	HOLE SIZE	CASING & TUBING SIZE	DEPTHS	ET	SACKS CE	MENT							
						-							
		1			<u> </u>								
					• • •								
V.	TEST DATA AND REQUEST FO	OR ALLOWABLE (Test must be a)	fter recovery of total vol pth or be for full 24 hour	ume of load oil ( •)	and must be equal to or	exceed top allow-							
	OIL WELL		Producing Method (Flo		t. etc.)								
	Date First New Oil Run To Tanks	Date of Test	Froductud Metuod (1,10	رده دمی ویرد.مان بــــــــــــــــــــــــــــــــــــ	-,,								
			<u> </u>		Chake Size								
	Length of Test	Tubing Pressure	Casing Pressure		Choke Size								
	Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	_	Gas-MCF								
						<del></del> _							
	GAS WELL												
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMC	F	Gravity of Condensa	i e							
		Tubing Pressure (shut-in)	Casing Pressure (Shu	t-in)	Choke Size	-							
	Testing Method (pitot, back pr.)	Lannid Liesema (Sunc. Tu )	1										
			<del> </del>										
VI.	CERTIFICATE OF COMPLIAN	C <b>E</b>	OIL		TION COMMISSION	NC							
			1										
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.  (Signature)			APPROVED, 19, 19										
							BY	BY					
			Contaction										
			TITLE										
			This form is t	This form is to be filed in compliance with RULE 1104.									
			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.										
								President	41-1	All sections of this form must be filled out completely for allowable on new and recompleted wells.			
								(Ti	ste)				
				December 20, 1976	Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.								
	(Da												

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, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.



7 - 2 1 1976

OIL COMSERVATE N COMM. HOBBS, N. M.