- 1	NO. OF COPIES RECEIVED			
	DISTRIBUTION SANTA FE		CONSERVATION COMMISSI	Form C-104
ŀ	FILE	- REQUES	T FOR ALLOWABLE	Supersedes Old C-104 and C-1. Effective 1-1-65
İ	U.S.G.S.	AUTHORIZATION TO TR	AND AND NATURAL	CAS
	LAND OFFICE			GAJ
	TRANSPORTER GAS	_		
	OPERATOR PROBATION OFFICE	-1		
•	Operator Warrior, Inc.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	Address 125 Midland Tower,	Midland, Texas 79701		
ł	Reason(s) for filing (Check proper ba		Other (Please explain)	
	New Well	Change in Transporter of:	Change of owners	hip to be effective
	Recompletion Change in Ownership	Oil Dry G Casinghead Gas Conde	Gas 🔄 November 1, 1976	
L	If change of ownership give name			
	and address of previous owner	Millard Deck, P. O. Bo	x 1047, Eunice, New Mez	cico 88231
	DESCRIPTION OF WELL AND Lease Name	LEASE   Well No.; Pool Name, Including I	Formation Kind of Lea	50
	Id <b>a</b> White		· · · · · · · · · · · · · · · · · · ·	al or Fee Patent
	Location Unit Letter K 198		ine andFeet From	
L	Line of Section <b>J</b> To	wnship 20S Range	-35E-36 , NMPM,	Lea County
I. I	DESIGNATION OF TRANSPOR Name of Authorized Transporter of Of	TER OF OIL AND NATURAL G	AS	
	Texas-New Mexico Pip		Address (Give address to which appro Box 1510, Midland, Te	
	Name of Authorized Transporter of Ca	singhead Gas 👔 or Dry Gas 🗍	Address (Give address to which appro	wed copy of this form is to be sent)
+		Unit Sec. Twp. Pge.		SQR, Texas 79760
	If well produces oil or liquids, give location of tanks.	K 35 20-S 35-E		
		th that from any other lease or pool,	give commingling order number:	
ſ	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Resty, Diff. Resty.
L	Designate Type of Completing			
	Date Spudded	Date Compl. Ready to Pred.	Total Depth	P.B.T.D.
I	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
	Perforations			Depth Casing Shoe
+	HOLE SIZE	TUBING, CASING, ANI CASING & TUBING SIZE	D CEMENTING RECORD	
┢			DEFINSEI	SACKS CEMENT
Γ				
+			**************************************	
- - - 7	TEST DATA AND REQUEST F		fter recovery of total volume of load oil	and must be equal to or exceed top allow.
C	DIL WELL	able for this de	epth or be for full 24 hours)	· · ·
C			ofter recovery of total volume of load oil epth or be for full 24 hours) Producing Method (Flow, pump, gas li	· · ·
	DIL WELL	able for this de	epth or be for full 24 hours)	· · · · ·
	DIL WFLL Date First New Oil Run To Tanks	able for this de Date of Test	epth or be for full 24 hours) Producing Method (Flow, pump, gas li	(i, etc.) Choke Size
	DIL WFLL Date First New Oil Run To Tanks Length of Test	able for this de Date of Test Tubing Prescure	epth or be for full 24 hours) Producing Method (Flow, pump, gas li Casing Pressure	(t, etc.)
	DIL WFLL Date First New Oil Run To Tanks Length of Test Actual Prod, During Test	able for this de Date of Test Tubing Prescure	epth or be for full 24 hours) Producing Method (Flow, pump, gas li Casing Pressure	(i, etc.) Choke Size
	DIL WFLL Date First New Oil Run To Tanks Length of Test	able for this de Date of Test Tubing Prescure	epth or be for full 24 hours) Producing Method (Flow, pump, gas li Casing Pressure	(i, etc.) Choke Size
	DIL WFLL Date First New Oil Run To Tanks Length of Test Actual Prod, During Test GAS WELL Actual Prod, Test-MCF/D	able for this de Date of Test Tubing Prescure Oil-Ebis.	epth or be for full 24 hours) Producing Method (Flow, pump, gas li Casing Pressure Water-Bbls, Bbls. Condensate/MMCF	(i, etc.) Choke Size Gas-MCF Gravity of Condensate
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	DIL WFLL Date First New Oil Run To Tanks Length of Test Actual Prod, During Test GAS WELL Actual Prod, Test-MCF/D	able for this de Date of Test Tubing Pressure Oll-Ebls. Length of Test Tubing Pressue (Shut-in)	epth or be for full 24 hours) Producing Method (Flow, pump, gas li Casing Pressure Water-Bbls. Bbls. Condensate/MMCF Cusing Pressure (Shut-in)	(i, etc.) Choke Size Gas-MCF Gravity of Condensate
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