	DISTRIBUTION ANTA FE ILE .S.G.S. AND OFFICE	REQUEST	CONSERVATION COMMISSION FOR ALLOWABLE AND ANSPORT OIL AND NATUR	Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65 AL GAS
1.	IRANSPORTER OIL GAS OPERATOR PRORATION OFFICE Operator			
	W. K. Byrom Address	, New Mexico 88240		
	Reason(s) for filing (Check proper box) New We!! Recompletion Change in Ownership 8-1-74			
	If change of ownership give name and address of previous owner AZT	ec Oil & Gas Co 2000	First National Bank	Bldg Dallas, Texas75202
I.	DESCRIPTION OF WELL AND Lease Name Williams	LEASE. Well No. Fool Name, Including F 2 Eumont Oueen	State, F	Lease No.
	Location Unit Letter I : 1660)	1980	From The South
	Line of Section 33 Tow	mship 19s Range 3	7E , NMPM,	Lea County
1.	Name of Authorized Transporter of Oil	Or Condensate	AS Address (Give address to which	approved copy of this form is to be sent)
	Name of Authorized Transporter of Cas El Paso Natural Gas Co.		Box 1492 - El Paso	approved 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 1955
v.	If this production is commingled wit COMPLETION DATA	Oil Well Gas Well	give commingling order number	
	Designate Type of Completic	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
	Perforations			Depth Casing Shoe
		TUBING, CASING, AN	D CEMENTING RECORD	
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
v.	TEST DATA AND REQUEST FOOIL WELL		after recovery of total volume of lo epth or be for full 24 hours)	ad oil and must be equal to or exceed top allow
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump,	gas lift, etc.)
	Length of Test	Tubing Pressure	Casing Pressure .	Choke Size
	Actual Prod. During Test	Oil-Bbis.	Water - Bbls.	Gcs-MCF
	CACWELY			
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
	Testing Method (pitat, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
VI. CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION		

R.R. anlerson (Signature) Office Mgr. (Title) August 5, 1974

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.

APPROVED_ Orig. Signed by
Joe D. Ramey Dist I Surve TITLE _

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.

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