NO. OF COPIES RECEIVED			
DISTRIBUTION			
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PRORATION OFFICE			

11.

DISTRIBUTION	.∢EW MEXICO OIL CONSERVATION COMMIS. Form C-104			
SANTA FE	Effective 1-1-65		Supersedes Old C-104 and C-110 Effective 1-1-65	
U.S.G.S.	AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS			
LAND OFFICE	AUTHORIZATION TO TRA	INSPORT OIL AND NATURAL	_ GAS	
OIL	-			
TRANSPORTER GAS				
OPERATOR				
PRORATION OFFICE	<u> </u>			
Operator Cities Corvi	ice Oll Company			
Address	ice of i company			
	obs, New Mexico 88240			
Reason(s) for filing (Check proper be		Other (Please explain)		
New We!l	Change in Transporter of:	_		
Recompletion	Oil Dry Ga	s <b>X</b>		
Change in Ownership	Casinghead Gas Conden	sate		
If change of ownership give name				
and address of previous owner				
DESCRIPTION OF WELL ANI	) I E AGE			
Lease Name	Well No.   Pool Name, Including Fo	ormation Kind of Le	ase Lease No.	
Laughlin #	1 Monument Graybu	irg San Andres State, Fed	eral or Fee 🐞 💂	
Location				
Unit Letter ;;	DO Feet From The North Lin	e and <u>1980</u> Feet Fro	m The <b>East</b>	
_	20.0	27p	100	
Line of Section 5 T	ownship 20\$ Range	37E , NMPM,	Lea County	
DESIGNATION OF TRANSPO	RTER OF OIL AND NATURAL GA	s		
Name of Authorized Transporter of C	or Condensate	Address (Give address to which app	proved copy of this form is to be sent)	
Name of Authorized Transporter of C	Casinghead Gas or Dry Gas 🌋		proved copy of this form is to be sent)	
Warren Petroleum Co.			Box 1197 Eunice, New Mexico	
If well produces oil or liquids,	Unit Sec. Twp. Rge.	,	When 1-15-69	
give location of tanks.	1 1	Yes	1-45-09	
	with that from any other lease or pool,	give commingling order number:		
COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back   Same Res'v. Diff. Res'v.	
Designate Type of Complet	ion - (X)			
Date Spudded	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	
			Depth Casing Shoe	
Perforations			Depth Casing Shoe	
	TURING CASING AND	CEMENTING RECORD		
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
11000 3120				
TEST DATA AND REQUEST			oil and must be equal to or exceed top allow-	
OIL WELL		pth or be for full 24 hours) Producing Method (Flow, pump, gas	s lift, etc.)	
Date First New Oil Run To Tanks	Date of Test	Producing Memor (1 100) pump, god		
Length of Test	Tubing Pressure	Casing Pressure Choke Size		
Langer of 1000			:	
Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	Gas-MCF	
GAS WELL				
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
	Bullion Brooms (Short 45.)	Casing Pressure (Shut-in)	Choke Size	
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Cdaing Pleasure (Since 11)	Chore bizz	
	NOT.	OU CONSER	VATION COMMISSION	
CERTIFICATE OF COMPLIANCE		OIL CONSER	VATION COMMISSION	
I hereby certify that the rules and regulations of the Oil Conservation		APPROVED	, 19	
Commission have been complied with and that the information given		Dr. Car		
above is true and complete to	the best of my knowledge and belief.	BY		
		TITL/F		
ORIGINAL SIGNED		This form is to be filed	in compliance with RULE 1104.	
& D. ROBERTSON rs this is a request for allowable for a newly dril		lowable for a newly drilled or deepened		
(Signature)		well, this form must be accome tests taken on the well in ac	nnanied by a tabulation of the deviation	
District Office	Manager	All sections of this form	must be filled out completely for allow-	
	Title)	able on new and recompleted	wells.	

VI.

January 15, 1969 (Date)

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.