NO. OF COPIES RECE	IVED	Ĺ	
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SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		L
RANSPORTER	GAS		
OPERATOR		<u> </u>	_
BROBATION OFFICE			

January 19, 1971

(Date)

	DISTRIBUTION SANTA FE FILE U.S.G.S. LAND OFFICE TRANSPORTER GAS	REQUEST FO	NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS			
-	PRORATION OFFICE					
1	Operator					
	John H. Hendrix					
Γ	316 Central Bldg, M	idland. Texas 79701				
-	Reason(s) for filing (Check proper box)		Other (Please explain)	Name from Alegka		
	New Well	Change in Transporter of: Oil Dry Gas	Change of Lease Cooper	Name from Alaska		
- 1	Recompletion	Oil Dry Gas Casinghead Gas Condense	1 1 1 -	2 2003		
Ī	Change in Ownership f change of ownership give name and address of previous owner					
		FASE		L toma No.		
II. [DESCRIPTION OF WELL AND L Lease Name New Name	Well Mo. Foot Itame, mersel	. Same Cadaral of	Lease No.		
1	Cooper *B*	12 Monument (Gr	ybSA)	Fee		
	Location D 330	•Feet From The North Line	and 330Feet From The	West		
	Unit Letter D : 330	• Feet From The HOLDIT Line				
	Line of Section 7 Tow	mship 205 Range	37E , NMPM, Lea	County		
		CER OF OU AND NATURAL GAS	S			
m.	Name of Authorized Transporter of Oil	rer of oil and natural gas or Condensate	Address (Give address to which approved	copy of this form is to be sent)		
	Shell Pipeline Corp		P.O. Box 2648. Houst	copy of this form is to be sent)		
	Name of Authorized Transporter of Cas		P.O. Box 1539, Tuls			
	Warren Petroleum Co	Unit Sec. Twp. Rge.	Is gas actually connected? When	İ		
	If well produces oil or liquids, give location of tanks.	H 12 20S 36E	Yes	Unknown		
	If this production is commingled wit	th that from any other lease or pool,	give commingling order number: PC.	-353		
IV.	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.		
	Designate Type of Completion	on – (X)		P.B.T.D.		
	Date Spudded	Date Compl. Ready to Prod.	Total Depth			
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth		
	Lievations (Dr., RRD, RT, OR, Story)			Pepth Casing Shoe		
	Perforations					
		TUBING, CASING, AND	CEMENTING RECORD			
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
v	TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a	ifter recovery of total volume of load oil a epth or be for full 24 hours)	nd must be equal to or exceed top attow-		
•	OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift	, etc.)		
	Date First New Oil Fidi. 10 1 ams			Choke Size		
	Length of Test	Tubing Pressure	Casing Pressure			
	Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	Gas-MCF		
	Actual Prod. During 1991					
	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate		
	Actual Prod. 1051-MC1/D		100	Choke Size		
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)			
			OIL CONSERVA	TION COMMISSION		
VI	. CERTIFICATE OF COMPLIAN	NCE		10		
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	the del		
			BY	mas		
			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 wells.			

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.

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Form C-194 Supersades old C-184 and C-119 Effective 1-1-85

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