STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

Form C-104
Revised 10-1-78

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

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FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER — OIL		
TRANSPORTER — GAS		
OPERATOR		
PRORATION OFFICE		

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.
Operator: Petro Lewis Corporation

Address: P.O. Box 16200 Lubbock, Texas 79490

Reason(s) for filing (Check proper box)
- New Well [ ]
- Recompletion [ ]
- Change in Ownership [X]

Change in Transporter of:
- Oil [ ]
- Dry Gas [ ]
- Casinghead Gas [ ]
- Condensate [ ]

Other (Please explain)

If change of ownership give name and address of previous owner: Ladd Petroleum Corporation, 830 Denver Club Bldg. Denver Co. 80202

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease State, Federal or Fee	Lease No.
Laughlin	1	Weir Blinebry (~~Monument (Tubb)~~)	Fee	

Location
Unit Letter H : 2310 Feet From The North Line and 330 Feet From The East
Line of Section 9 Township 20-S Range 37-E , NMPM, Lea County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil [X] or Condensate [ ]	Address (Give address to which approved copy of this form is to be sent)
Shell Pipeline Co.	P.O. Box 1910 Midland, Texas
Name of Authorized Transporter of Casinghead Gas [X] or Dry Gas [ ]	**Address (Give address to which approved copy of this form is to be sent)**
Warren Petroleum	P.O. Box 1589 Tulsa, Oklahoma

If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	H	9	20-S	37-E	Yes	February 27, 1966

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion – (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.

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**
Perforations			**Depth Casing Shoe**

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

V. TEST DATA AND REQUEST FOR ALLOWABLE
(Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

OIL WELL

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-Bbls.**	**Water-Bbls.**	**Gas-MCF**

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	**Tubing Pressure (shut-in)**	**Casing Pressure (shut-in)**	**Choke Size**

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

[signature]
(Signature)
Prod. Engineer
(Title)
9-6-83
(Date)

OIL CONSERVATION DIVISION

APPROVED SEP 14 1983, 19

BY ORIGINAL SIGNED BY JERRY SEXTON

TITLE DISTRICT I SUPERVISOR

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.

[illegible]