NO. OF COPIES RECT	LIVED	l	
DISTRIBUTION			
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE		1	
I RANSPORTER	OIL		
	GAS		
OPERATOR			
		1	

## NEW MEXICO OIL CONSERVATION COMMISSION

SANTA FE	I DEDUEST	FOD ALLOWADIE	Supersedes Old C-104 and C-110
FILE		FOR ALLOWABLE	Effective 1-1-65
U.S.G.S.	AUTHORIZATION TO TO	· · · · · · · · ·	_
LAND OFFICE	AUTHORIZATION TO TR	ANSPORT OIL AND NATURAL GA	.5
OIL	<del> </del>		
TRANSPORTER			
GAS			
OPERATOR			
I. PRORATION OFFICE			
Operator			
Belco Petroleum	Commonation		
Address	Corporation		
P.O. Box 19234 Reason(s) for filing (Check proper b	Houston, Texas 77024	10sh - (B)	
	·	Other (Please explain)	
New We!I	Change in Transporter of:		
Recompletion	Otl Dry G	as Effective 4-1-7	-
Change in Ownership	Casinghead Gas Conde		· ·
If change of ownership give name and address of previous owner	•		
and address of previous owner			
II DECODINATION OF WALL AND	h . D. an		
II. DESCRIPTION OF WELL AN	Well No. Pool Name, Including F		
Cease Name	well No. Pool Nume, Inc. caing F	İ	Lease No.
Base Federal Con	1 South Salt Tak	State, Federal o	Federal N40 30222
Location	1 South Salt Lal	ce (Morrow)	1000181 MIN 30235
Unit Letter F : 198	?O Feet From The 37	ne and the East Form Th	
196	Feet From The North	ne and 1980 Feet From The	- West
Line of Section 30	Township 20 a Range	NO COV	_
Line of Section 30	Township 20-S Range	33-E , NMPM, Lea	County
<b></b>			
	RTER OF OIL AND NATURAL GA		
Name of Authorized Transporter of (	Oil or Condensate	Address (Give address to which approved	copy of this form is to be sent)
5	••	W4 31 an	3 M 70707
Name of Authorized Hansporterus	Yinghead Gas or Dry Gas	2510 SWGivFlants Statich approved	I copy of this form is to be sent)
	Δ.		
El Paso Natural	Gas Co. Sec. Twp. Age.	P.O. Box 1492 E1 Pason Texas 79999	
If well produces oil or liquids,	omt   Sec.   Twp.   Fige.	is gus actually connected? when	
give location of tanks.	F 30 20-S 33-E	Yes	9-12-73
If this production is commingled:	with that from any other lease or pool,		7-12-/3
IV. COMPLETION DATA	with that from any other reade of poor,	give committigiting order number.	
	Oil Well Gas Well	New Well Workover Deepen	Flug Back   Same Resty. Diff. Resty.
Designate Type of Comple	tion = (X)		
Date Soudded	Date Court Bandy to Dark	+	
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
Feriorations			
Periorations			1
Periodions	TIPNIA CASINA AN		
renording	TUBING, CASING, AN	D CEMENTING RECORD	
HOLE SIZE	TUBING, CASING, AN	D CEMENTING RECORD  DEPTH SET	SACKS CEMENT
			SACKS CEMENT
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	
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V. TEST DATA AND REQUEST OIL WELL	CASING & TUBING SIZE  FOR ALLOWABLE (Test must be a able for this di	DEPTH SET  Infer recovery of total volume of load oil and epth or be for full 24 hours)	i must be equal to or exceed top allow-
HOLE SIZE  V. TEST DATA AND REQUEST	CASING & TUBING SIZE  FOR ALLOWABLE (Test must be a	DEPTH SET	i must be equal to or exceed top allow-
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V. TEST DATA AND REQUEST OIL WELL	CASING & TUBING SIZE  FOR ALLOWABLE (Test must be a able for this di	DEPTH SET  Infer recovery of total volume of load oil and epth or be for full 24 hours)  Producing Method (Flow, pump, gas lift,	i must be equal to or exceed top allow-
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