1.	HO. OF COPIES RECEIVED   DISTRIBUTION   SANTA FE   FILE   U.S.G.S.   LAND OFFICE   TRANSPORTER   OPERATOR   PRORATION OFFICE	REQUE	L CONSERVATION COMMISSION ST FOR ALLOWABLE AND TRANSPORT OIL AND NATURA	Form C-104 Supersedes Old C-104 and C- Effective 1-1-65 L GAS	
	Operator Walter W. Krug DBA Wallen Production Company				
	Address				
	Other (Please explain)				
	Recompletion	Change in Transporter of: Oil Dry	Gas		
	Change in Ownership	Casinghead Gas Con	idensate		
	If change of ownership give name and address of previous owner				
11.	DESCRIPTION OF WELL ANI	LEASE			
	Vallen Federal	Well No. Pool Name, Including		Lease No.	
	Wallen Federal   4   North-Lynch, Yates   State, Federal or Fee   Federal   LCO2     Location   Unit Letter   1   330   Feet From The   S				
	Line of Section 17 To	owmship 20 S Range	34 E , NMPM,	Lea	
III.	DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL (		Liea County	
	Name of Authorized Transporter of O	il 🕰 or Condensate 🗌	Address (Give address to which app.	roved copy of this form is to be sent)	
	Texas-New Mexico Pipeline Ninem We'z Maveran °excess over What we use Address (Give address to which approved copy of this form is to be sent)				
	we'll sell to Llan	tess over what we u to Pipeline Company	Service address to which app;	roved copy of this form is to be sent)	
	If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected? W	When we have	
1	give location of tanks.	D 17 205 34		enough to sell	
IV. 2	COMPLETION DATA	his production is commingled with that from any other lease or pool, give commingling order number:			
	Designate Type of Completi	on - (X) Oil Well Gas Well	New Well Workover Deepen	Plug Back   Same Res'v. Diff. Res'v.	
ļ	Date Spudded	Date Compl. Ready to Prod.	X   Total Depth	P.B.T.D.	
	<u>11-20-72</u> Elevations (DF, RKB, RT, GR, erc.)	3-28-73	3576*	35671	
	GR 3633	Name of Producing Formation Yates	Top Oli/Gas Pay 3360	Tubing Depth	
· F	Perforations	1 10005	1 3300	3513 Depth Casing Shoe	
+	356			3567 •	
-	HOLE SIZE	TUBING, CASING, AN CASING & TUBING SIZE	D CEMENTING RECORD		
	15"	13 3/8"	98.64"	SACKS CEMENT	
Ĺ	12 1/4"	10 3/4"	815'	57 sks Class C neat Mudded in	
-	10"	8 5/8"	1475'	Mudded in	
	-6.1/4"	7 1/2	3315'	470 sks Class C	
(	ST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allow- L WELL able for this depth or be for full 24 hours)				
ſ	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas li	ift, etc.)	
H	4-2-73	4-2-73 Tubing Pressure	Pumping	-	
.	24 hours	90 psig	Casing Pressure	Choke Size	
	Actual Pred. During Test	Oll-Bbls.	125 psig Water-Bble.	Gga-MCF	
l	102	67	35	40	
G	AS WELL				
	Actual Prod. Test-MCF/D	Length of Teat	Bbls. Condensate/MMCF	Gravity of Condensate	
				Craining of Condensate	
	esting Method (pitot, back pr.)	Tubing Pressure (Shut-in )	Casing Pressure (Shut-in)	Choka Siza	
VI. CERTIFICATE OF COMPLIANCE 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 beat of my knowledge and belief.			OIL CONSERVATION COMMISSION		
			APPROVED 19		
			Alx Aq.		
~ •		and of the whom and and periot.	BY	meg	
		7/	TITLE	<u>//</u>	
	Matte N %	Ma	This form is to be filed in c		
(Signature)			If this is a request for allowable for a newly drilled or despende- well, this form must be accompanied by a tabulation of the deviation		
	Engineer	a de la companya de la compa	tests taken on the well in accordance with RULZ 111.		
(Title)			All sections of this form must be filled out completely for allow-		