NO. OF COPIES RECEIVED			
DISTRIBUTION	NEW MEXICO OIL (CONSERVATION COMMISS .	Form C-104
SANTA FE		FOR ALLOWABLE	Supersedes Old C-104 and C-1 Effective 1-1-65
FILE U.S.G.S.		AND	
LAND OFFICE	AUTHORIZATION TO TR	ANSPORT OIL AND NATURAL	GAS
IRANSPORTER GAS			
OPERATOR PRORATION OFFICE			· · · · · · · · · · · · · · · · · · ·
Admin			
Reason(s) for filing (Check proper be	DX)	Other (Please explain)	
Mew West	Change in Transporter of: Oil Pry G		
Freeding letion Thin perm Ownership		=	in Pet. Corp.W.H.Turner #2
If change of ownership give name and address of previous owner	Pan American Pet. Corp.,		·
DESCRIPTION OF WELL AND	LEASE /2/	ame, including Formation	Kind of Lease
	29	· · · · · · · · · · · · · · · · · · ·	State, Federal or Fee
Longition			
Mait Letter <u>0</u> ; <u>33</u>	O Peet From The South Li	ne and <u>2310</u> Feet From	m The Last
Line i Destion 20 , T	ownship Range	, NMEM,	County
Description of The Avence	DOWN OF OUR AND MATERIDAL C	A.C.	
DESIGNATION OF TRANSPORMED of Commercial Authorized Transporter of Commercial Authori	RTER OF OIL AND NATURAL G		roved copy of this form is to be sent)
·		Circle Line Line	describing from in to be continued.
Demoni Authorized Transporter of	asingheac Gasor Dry Gas [Andress (Give address to which app	proved copy of this form is to be sent)
If well projuces all or liquids,	Unit Sec. Pwr. Rge.	Is gas actually connected?	When
nive je enter, of tunks.	J 29		
f this production is commingled v COMPLETION DATA	with that from any other lease or pool	, give commingling order number:	
Designate Type of Complet	$\operatorname{Coil} Well$ Gas Well $\operatorname{Coin} - (X)$	New Well Work over Deeper.	Plug Back Same Restv. Diff. Res
fatter i publied	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
1001	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
errior mons			Depth Casing Shoe
		ID CENTING DECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
	FOR ALLOWABLE (Test must be able for this	after recovery of total volume of load o lepth or be for full 24 hours)	oil and must be equal to or exceed top allo
OH. WELL Late Pirst New Cil Ran To Tanks	Date of Test	Freducing Method (Flow, pump, gas	lift, etc.)
. 51.74	(Paking I	Casing Pressure	Choke Size
Length of Tent	Tubing I ressure	Casing Pressure	Choke Size
A steel Fro t. Learing Test	Oil-Bbls.	Water-Bbls.	Gas - MCF
GAS WELL			
Artual Frod. Test-MOF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
. estima Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size
CEPTIFICATE OF COUNTY	NCE	OIL CONSERV	VATION COMMISSION
CERTIFICATE OF COMPLIA	NCE		
	d regulations of the Oil Conservation	APPROVED	<i>3 C</i> , 19
	with and that the information given he best of my knowledge and belief.		

(Signature)

(Title)

(Date)

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.

This form is to be filed in compliance with RULE 1104.

Fill out Sections I, II, III, and VI only 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.