SA TAFE FI E G.S.		REQUES AUTHORIZATION TO TR	CONSERVATION COMP T FOR ALLOWABLE AND RANSPORT OIL AND		Form C-104 Supersedes Old C-104 and C-1 Effective 1-1-65
TRANSPORTER OF GA OPERATOR PRORATION OFFICE Operator	.5	1 - W. L. Boone, Ho 1 - R. L. White, Mi 1 - File	ouston	THE SAS	
Address P.O. Box Reason(s) for filing (Chec	249, Ho	bbs, New Mexico 88240) Other (Olever		
New Well Recompletion XX Change in Ownership		Change in Transporter of: Oil Dry (abre un	til well can l ter can be re	2000 testing allow- be stabilized and al turned.
If change of ownership gand address of previous	ive name owner				
II. DESCRIPTION OF WI	ELL AND I	Well No. Pool Name, Including	Caraghta	·	
State "Q"		1 Blinebry		Kind of Lease State, Federal or Fee	State Lease No.
Unit Letter N	2/	Feet From The South Lineship 21S Bange	200	Feet From The	West
			37E , NMPM	. Lea	County
Name of Authorized Trans	porter of Oil	ER OF OIL AND NATURAL G. Condensate Compeny		o which approved copy	of this form is to be sent)
Name of Authorized Trans. El 1880 we ture. Skelly Oil Co. If well produces oil or liquidive location of tanks.	- Low P	ressure (Casinghead) Unit Sec. Twp. Pge. N 36 21 37		e which approved caps aso Texes 79 and, Texes 79 d? When	1978 form is to be sent) 701
If this production is com	ningled with	that from any other lease or pool,	_l	1 2-26- number:	259
Designate Type of	Completion	Oil Well Gas Well	New Well Workover	Deepen Plug B	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	Tubinç	7 Depth
Perforations				Depth	Casing Shoe
			CEMENTING RECORD)	
HOLE SIZE		CASING & TUBING SIZE	DEPTH SE	<u>T</u>	SACKS CEMENT
V. TEST DATA AND REG	UEST FO	R ALLOWABLE (Test must be a	fter recovery of total volumenth or be for full 24 hours	e of load oil and must	be equal to or exceed top allow-
7	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		011 - Bble.	Water - Bbls.	Gas - M	CF
GAS WELL					
Actual Prod. Test-MCF/D	I	ength of Test	Bbls. Condensate/MMCF	Gravity	of Condensate
Testing Method (pitot, back	pr.) 1	Tubing Pressure (Shut-in)			Size
I. CERTIFICATE OF COMPLIANCE			OIL CONSERVATION COMMISSION		
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given			APPROVED 19		
above is true and complete to the best of my knowledge and belief.			BY		

TITLE .

(Signature)

(Title)

(Date)

Area Engineer

Feb. 12, 1975

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 transporten or other such change of condition.

CIL CONSERVATION COMM.