NO. OF COPIES REC	EIVED	j
DISTRIBUTIO	ON	
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OF	ICE	
Operator		·

	DISTRIBUTION			•
	SANTA FE	NEW MEXICO OIL	CONSERVATION COMMISSIO	N Form C-104
	FILE	REQUES	T FOR ABLOWABLEE G. G	Supersedes Old C-104 and Effective 1-1-65
	U.S.G.S.		ANU	
	LAND OFFICE	AUTHORIZATION TO TE	RANSHORT OIL JAND NATI	順外L GAS
	T OU	<del> </del>	yea O TH Lib	31
	TRANSPORTER GAS			
	OPERATOR		BIASSE C	HANGE
ı.	PRORATION OFFICE		NAME C	
	Operator			DADA SECONDO
	Amerada Petro	leum Corporation		RADA HESS JOR <b>P.</b> VE Juny 1, 1969
ļ	P.O. Box 668	Hebbs, New Mexico		
	Reason(s) for filing (Check proper	box)	Other (Please expla	in)
	New We!I	Change in Transporter of:		
	Recompletion	Oil Dry	Gas	
į	Change in Ownership	Casinghead Gas Cond	ensate	
	If change of ownership give name and address of previous owner	•		
II.	DESCRIPTION OF WELL AN			
Ì	Lease Name	Well No. Pool Name, Including	Formation Kind	o: Lease N
-	Warren McKee Unit	401 Marren Mcl	State	Federal or Fee
	Location			
	Unit Letter X ; 9	Feet From The <b>South</b> L	ine andFee	t From The West
	Line of Section 7	Fownship 26_3 Range	SO TO NILIDA	_
<u>.</u>		Trange	38_R , NMPM,	Count
III. j	DESIGNATION OF TRANSPO	RTER OF OIL AND NATURAL G	AS	
Γ	Name of Authorized Transporter of (	or Condensate		h approved copy of this form is to be sent)
Ĺ	Shell Pipe Line C	erp.	P.O. Box 1598, He	bbs. New Merica
	Name of Authorized Transporter of (	Casinghead Gas or Dry Gas	Address (Give address to whic	h approved copy of this form is to be sent!
	Warren Petroloum Amerada Petroloum	Corp.	P.O. Box 67, Mont	ment, New Mexico
	If well produces oil or liquids,	Umit Sec. Twp. Rge.	Is gas actually connected?	wat <sub>when</sub> New Mexico
	give location of tanks.	T 18 208 38E	<b>T</b>	
I	f this production is commingled	with that from any other lease or pool	give commingling order numb	911
IV. 🤇	COMPLETION DATA	The state of the s	Sive comminging order numb	
	Designate Type of Complete	Oil Well Gas Well	New Well Workover Dee	pen Plug Back Same Res'v. Diff. Res
	Designate Type of Complete	tion – (X)		pen Plug Back Same Res'v. Diff. Res
	Designate Type of Complete		New Well Workover Dee	P.B.T.D.
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
		Date Compl. Ready to Prod.		
î	Date Spudded  Elevations (DF, RKB, RT, GR, etc.,	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.  Tubing Depth
î	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
î	Date Spudded  Elevations (DF, RKB, RT, GR, etc.,	Date Compl. Ready to Prod.  Name of Producing Formation	Total Depth  Top Oil/Gas Pay	P.B.T.D.  Tubing Depth
î	Date Spudded  Elevations (DF, RKB, RT, GR, etc.,	Date Compl. Ready to Prod.  Name of Producing Formation  TUBING, CASING, AN	Total Depth  Top Oil/Gas Pay  D CEMENTING RECORD	P.B.T.D.  Tubing Depth
î	Date Spudded  Elevations (DF, RKB, RT, GR, etc.,	Date Compl. Ready to Prod.  Name of Producing Formation	Total Depth  Top Oil/Gas Pay	P.B.T.D.  Tubing Depth
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	Date Spudded  Elevations (DF, RKB, RT, GR, etc.,  Perforations  HOLE SIZE	Date Compl. Ready to Prod.  Name of Producing Formation  TUBING, CASING, AN CASING & TUBING SIZE	Total Depth  Top Oil/Gas Pay  D CEMENTING RECORD  DEPTH SET	P.B.T.D.  Tubing Depth  Depth Casing Shoe  SACKS CEMENT
V. 1	Date Spudded  Elevations (DF, RKB, RT, GR, etc.,  Perforations  HOLE SIZE	Date Compl. Ready to Prod.  Name of Producing Formation  TUBING, CASING, AN CASING & TUBING SIZE  FOR ALLOWABLE (Test must be a	Total Depth  Top Oil/Gas Pay  D CEMENTING RECORD  DEPTH SET	P.B.T.D.  Tubing Depth  Depth Casing Shoe
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V. 1	Date Spudded  Elevations (DF, RKB, RT, GR, etc.,  Perforations  HOLE SIZE  FEST DATA AND REQUEST :  DIL WELL  Date First New Oil Run To Tanks  Length of Teet  Actual Prod. During Teet	Date Compl. Ready to Prod.  Name of Producing Formation  TUBING, CASING, AN  CASING & TUBING SIZE  FOR ALLOWABLE (Test must be a able for this d.  Date of Test  Tubing Pressure  Oil-Bbls.	Total Depth  Top Oil/Gas Pay  D CEMENTING RECORD  DEPTH SET  Infer recovery of total volume of logerth or be for full 24 hours)  Producing Method (Flow, pump,  Casing Pressure  Water-Bbls.	P.B.T.D.  Tubing Depth  Depth Casing Shoe  SACKS CEMENT  Pad oil and must be equal to or exceed top all gas lift, etc.)  Choke Size  Gas-MCF
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V. 1	Perforations  HOLE SIZE  HOLE SIZE  TEST DATA AND REQUEST  DIL WELL  Date First New Oil Run To Tanks  Length of Test  Actual Prod. During Test  GAS WELL  Actual Prod. Test-MCF/D  Testing Method (pitot, back pr.)	Date Compl. Ready to Prod.  Name of Producing Formation  TUBING, CASING, AN  CASING & TUBING SIZE  FOR ALLOWABLE (Test must be a able for this d.  Date of Test  Tubing Pressure  Oil-Bbls.  Length of Test  Tubing Pressure (Shut-in)	Total Depth  Top Oil/Gas Pay  D CEMENTING RECORD  DEPTH SET  Interrecovery of total volume of logeth or be for full 24 hours)  Producing Method (Flow, pump,  Casing Pressure  Water-Bbis.  Bbls. Condensate/MMCF  Casing Pressure (Shut-in)  OIL. CONSE	P.B.T.D.  Tubing Depth  Depth Casing Shoe  SACKS CEMENT  Pad oil and must be equal to or exceed top all  gas lift, etc.)  Choke Size  Gas-MCF  Gravity of Condensate
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B.J. Ling (Signature) District Superintendent

(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.

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.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

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