DISTRIBUTION				
SANTA FE		NEW MEXICO OIL CONSERVATION COMMISSION Form C+104 REQUEST FOR ALLOWABLE Supersedes O		
FILE		AND Effective 1-1-65		
U.S.G.S. LAND OFFICE	AUTHORIZATION TO TR	ANSPORT OIL AND NATUR	AL GXET 29 7 38 M 15	
IRANSPORTER OIL GAS				
OPERATOR		ter de CP	4. 05	
PRORATION OFFICE			THE MOOPR.	
	oleum Corporation		194 rites - CORP. Talk 1: 1969	
P. 0. Box 66	8 - Hobbs, New Mexico			
Reason(s) for filing (Check proper b thew Well theory letter.	ox) Change in Transporter of: Cil Dry G	Other (Please explain) To change name eff. 11-165.	from F. Turner Jr. "A" #10 Ref. NMOCC Order No.	
Champelin (whership)	Casinghead Gas 📃 Conde			
If change of ownership give name and address of previous owner				
DESCRIPTION OF WELL ANI		me, including Formation	Kind of Lease	
Warren McKee Unit	110	Warren McKee	State, Federal or Fee Fee	
Unit Letter <b>G</b> : <b>19</b>	80 Feet From The North Lit	ne and Feet F	rom The East	
Line of Section 18 , T	ownship <b>20-S</b> Range	<b>38-E</b> , <u>NMPM</u> ,	Lea County	
	RTER OF OIL AND NATURAL GA	15		
Name of Authorized Transporter of C Shell Pipe Line Co.		Address (Give address to which a Box 1598, Hobbs, No	pproved copy of this form is to be sent)	
Name of Authorized Transporter of C Warren Petroleum Co	asinghead Gas 🗶 cr Dry Gas 🔤	Address (Give address to which a	pproved copy of this form is to be sent)	
Amerada Petroleum C. If well produces oil or liquids, give location of tanks.	TUnit Sec. Twp. Rge.	Box 67, Monument, I Drawer "D", Monumer Is gas actually connected?	when Mexico	
	I 18 20S 38E	Tés		
COMPLETION DATA				
Designate Type of Complet	ion - (X)	New Wel, Workover Deeper	Plug Back   Same Restv. Diff. Restv	
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.3.T.D.	
Pool	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
Perforations			Depth Casing Shee	
······································	TUBING, CASING, AND	CEMENTING RECORD		
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
		*		
	FOR ALLOWABLE (Test must be a	fter recovery of total volume of load pth or be for full 24 hours)	ail and must be equal to or exceed top allow	
OIL WELL Date First New Off Hun To Tanks	Date of Test	Producing Method (Flow, pump, go	as lift, etc.,	
Length of Test	Tubing Pressure	Casing Fressure	Choke Blae	
Actual Prod. During Test	Oii • Bpis	Wgter-Bbls,	das - MCF	
GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls, Condensate/MMCF	Gravity of Condensate	
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure		
			Choke Size	
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 above is true and complete to the best of my knowledge and belief.		APPROVED, 19		
soove is true and complete to th	w bear of my knowledge and belief.	2Ý		
<b>O 1</b>	1 /			
District Superintendent		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.		
				(Title)
October 22, 1965			III, and VI only for changes of owner, porter, or other such change of condition.	