NO. OF COPIES RECEIVED				
DISTRIBUTION				
SANTA FE				
FILE				
U.S.G.S.				
LAND OFFICE				
TRANSPORTER	OIL			
IRANSPORTER	GAS	Ĺ		
OPERATOR				
PROBATION OFFICE				

NEW MEXICO OIL CONSERVATION COMMISSION

Form C -104

}	SANTA FE	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-11		
	FILE		AND	Effective 1-1-65		
	U.S.G.S.	AUTHORIZATION TO TRA	NSPORT OIL AND NATURAL G	AS		
1	LAND OFFICE					
	I RANSPORTER GAS					
	OPERATOR					
	PRORATION OFFICE					
1.	Operator					
	THE WISER OIL COMPAN'	Υ				
	Address 905 Oil & Gas Building, Wichita Falls, Texas 76301					
	Reason(s) for filing (Check proper box) Other (Please explain) Note: Change of gas gatherer from					
	New Well	Petro-lewis Corporation to				
	Recompletion	Oil Dry Gas	Getty Oil	Company eff. 5-1-84.		
	Change in Ow tership	Casinghead Gas XX Conden	sale	oompany 2		
	If change of ownership give name					
	and address of previous owner					
	THE STATE OF	. TACE				
II.	DESCRIPTION OF WELL AND	Well No. Pool Name, Including Fo	ormation Kind of Lease	i		
	Shell A State	1 Eunice Seven R	vrs Queen South State, Federa	or Fee State B-1167		
	Location					
	€D 66	O Feet From The North Line	e and 660 Feet From	The West		
	Unit Letter,			100		
	Line of Section 16 Tov	vnship 22-S Range	36-Е , ммрм,	Lea County		
			_			
III.	DESIGNATION OF TRANSPORT	rer of oil and natural ga	Address (Give address to which appro-	ved copy of this form is to be sent)		
	Name of Authorized Transporter of Oil	N inc Company	Box 1510, Midland, Texa	;		
	Texas-New Mexico Pip	e Line Company	Address (Give address to which approved copy of this form is to be sent)			
	Getty Oil Company	singhed ods o. 21, 020	Box 3000, Tulsa, Oklaho	3		
		Unit Sec. Twp. P.ge.	is gas actually connected? Who			
	If well produces oil or liquids, give location of tanks.	D 16 22-S 36-E	Yes			
		that for any other language pool	give commingling order number:	No		
	If this production is commingled wire COMPLETION DATA	th that from any other lease or pool,	give comminging order name			
1 .		Oil Well Gas Weli	New Well Workover Deepen	Plug Back Same Resty. Diff. Resty.		
	Designate Type of Completion	1		P.B.T.D.		
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	7.5.1.5.		
		Name of Producing Formation	Top Oll/Gas Pay	Tubing Depth		
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formulation				
				Depth Casing Shoe		
	Perforations					
		TUBING, CASING, AND CEMENTING RECORD				
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
				+		
V.	TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a	fier recovery of total volume of load oil onth or he for full 24 hours)	and must be equal to or exceed top allow-		
	OII. WELL Date First New Oil Run To Tanks Date of Test Date First New Oil Run To Tanks Date of Test Producing Method (Flow, pump, gas lift, etc.)					
	Date First New Oil Run 16 1 diks	Date of 1997				
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size		
	Earlight of 1051					
	Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF		
	GAS WELL		Tour on the one of the	Gravity of Condensate		
	Actual Prod. Test-MCF/D	Length of Test	Bbls, Condensate/MMCF	Gidvity or Condensate		
			Casing Pressure (Shut-in)	Choke Size		
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Cosing Piessme (Shee 12)			
	OU CONSERVATION CONSISSION					
VI. CERTIFICATE OF COMPLIANCE			OIL CONSERVATION COMMISSION			
			APPROVED JUL ~ 3 1984			
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given		THE THE THE PERSON AND THE TENTE OF THE TENT				
above is true and complete to the best of my knowledge and belief.			DISTRICT I SUPERVISOR			
			TITLE			
	The III Leave so		This form is to be filed in compliance with RULE 1104.			
	the It terms	M H Farguson				

Production Superintendent

(Title)

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 allow-