ND. OF COPIES RECEIVED					
DISTRIBUTION		CONSERVATION COMMISSION	Form C-104		
FILE	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-11 Effective 1-1-65		
U.S.G.S.		AND ANSPORT OIL AND NATURAL			
LAND OFFICE		ANSPORT OIL AND NATURAL	GAS		
I RANSPORTER OIL			·		
GAS					
OPERATOR					
I. PRORATION OFFICE					
Petro-Lewis	Corporation				
Address	· · · · · · · · · · · · · · · · · · ·				
607 Austin,	Levelland, TX. 793	36			
Reason(s) for filing (Check proper b	10 <b>x</b> j	Other (Please explain)			
New Well	Change in Transporter of:				
necompletion					
Change in Ownership X	Casinghead Gas Conder				
If change of ownership give name	ר Imperial-American E				
and address of previous owner	Imperial American B4	nergy, inc.			
II. DESCRIPTION OF WELL AN	D LEASE				
Lease Name Art Yeager	Well No. Fool Name, Including F				
AIL leager	l Drinkard	State, Fede	ral or Fee Fee		
Location					
Unit Letter J	980 Feet From The South Lir	ne and <u>1980</u> Feet From	The <u>East</u>		
25					
Line of Section 25	Township 21-S Range	<u>37-E</u> , NMPM, Lea	County		
IL DESIGNATION OF TRANSPO	RTER OF OIL AND NATURAL GA	30			
Name of Authorized Transporter of			oved copy of this form is to be sent)		
Permain Corp	oration	Box 3119. Midlan	d. TX		
	Casinghead Gas 📈 or Dry Gas 🧮	Address (Give address to which appr	nd, TX. oved copy of this form is to be sent)		
Skelly Oil C	ompany	Box 1650, Tulsa, Is gas actually connected?	OK.		
If well produces oil or liquids,	Unit Sec. Twp. Ege.		hen		
give location of tanks.	J/0 25 21-8 37-E	Yes			
	with that from any other lease or pool,	give commingling order number:			
V. COMPLETION DATA	Cil Well Gas Well	New Weil Workover Deepen	Piug Back Same Res'v. Diff. Res'v.		
Designate Type of Comple	tion $-(X)$				
Date Spudced	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.	Name of Producing Pormation	Top Oil/Gas Pay	Tubing Depth		
Perforations			Depth Casing Shoe .		
		D CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
		-			
		1			
V. TEST DATA AND REQUEST	FOR ALLOWABLE (Test must be o	after recovery of total volume of load of	il and must be equal to or exceed top allow		
OIL WELL	able for this de	epth or be for full 24 hours)	· · · · · · · · · · · · · · · · · · ·		
Dale First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas	liji, etc.)		
			I Choke Size		
Length of Test	Tubing Pressure	Casing Pressure	Chore Size		
Actual Prod. During Test	   011-3bis.	Water-Bbls.			
Actual Fibe, During 1980					
1	<u></u>	<u></u>	<u></u>		
GAS WELL					
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate		
Testing Method (pitor, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shrt-in)	Choke Size		
	!	1			
VI. CERTIFICATE OF COMPLIA	INCE	OIL CONSERVATION COMMISSION			
		ADDONED IN 19 A	15/8 19		
I hereby certify that the rules ar Commission have been compliant	nd regulations of the Oil Conservation d with and that the information given		, ı, ı		
above is true and complete to	the best of my knowledge and belief.	BYOrig. Signed by			
		John Runyan			

A martine
Mors, Internal Oper.
(Title)
5-9-78
(Date)

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

Geologist

TITLE \_

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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