	DO DE CONTRACTORIO I DE CONTRACTORIO I DE CONTRACTORIO DE CONTRACTORIO PROMATION OFFICE	PEQUEST	OUSERVATION COMMISSION FOR ALLOWAGLE AND NSPORT OIL AND NATURAL G	Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65 AS
X - (Operator Operator NATURAL RESOURCES GROUP, INC. Audress 1100 Wilco Building, Midland, Texas 79701 Reason(s) for filing (Check proper box) New Welt Change in Transporter of: Recompletion Oil Dry Gas Change in Operator Change in Ownership X Casinghead Gas			
	If change of ownership give name T and address of previous ownerT DESCRIPTION OF WELL AND I Lease Name	aubros Oil & Gas-Sot	ormation Kind of Lease	5596, Midland, Texas 79701
111			e and <u>1980</u> Feet From Ti 8-E , NMPM, <u>I</u>	or FeeFederal LC-045708 -b he East Lea County
111.	DESIGNATION OF TRANSPORT Naite of Authorized Transporter of Oll The Permian Corpor Naite of Authorized Transporter of Cas None If well produces oil or liquids, give location of tanks.	X or Condensate 🗌 ation	Address (Give address to which approve P.O. BOX 3119, Midl Address (Give address to which approve Is gas actually connected? When	and, Texas 79701 ed copy of this form is to be sent)
IV.	If this production is commingled wit <u>COMPLETION DATA</u> Designate Type of Completio Date Spudded Elevations (DF, RKB, RT, GR, etc.)	h that from any other lease or pool, Oil Well Gas Well Date Compl. Ready to Prod.	give commingling order number:	Plug Back Same Restv. Diff. Restv. P.B.T.D. Tubing Depth
	Perforations HOLE SIZE	TUBING, CASING, AND CASING & TUBING SIZE	DEPTH SET	Depth Casing Shoe SACKS CEMENT
v .	TEST DATA AND REQUEST F(GIL WELL Date First New Oil Bun To Tanks	DR ALLOWABLE (Test must be aj able for this de Date of Test	fter recovery of total volume of locd oil a pth or be for full 24 hours) Producing Method (Flow, pump, gas lift	
	Length of Test Actual Prod. During Test	Tubing Pressure Oll-Bbls.	Casing Pressure Water-Bbis.	Choke S.ze Gas-MCF
· · · · · · · · · · · · · · · · · · ·	GAS WELL Actual Prod. Test-MCF/D Testing Method (pitot, back pr.)	Length of Test Tubing Pressure (Shut-in)	Bbls. Condensate/MMCF Casing Pressure (Shut-in)	Gravity of Condensate Choke Size
	I. CERTIFICATE OF COMPLIANCE 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.		OIL CONSERVATION COMMISSION APPROVED FEB 5 1971 BY	
	Chief Geologist February 23, 1971	ie)	This form is to be filed in c If this is a request for allow- well, this form must be accompan- tests taken on the well in accor All sections of this form mus- able on new and recompleted well Fill out only Sections I II	ompliance with RULE 1104. able for a newly drilled or deepened iled by a tabulation of the deviation dance with RULE 111. It be filled out completely for allow-