SANTA FE RECUEST FOR ALLOWABLE Super	
FILE AND U.S.G.S. AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS LAND OFFICE OIL I RANSPORTER OIL . GAS OPERATOR PRORATION OFFICE OIL . Onoco Inc. Address Address P.O. Box 460, Hobbs, New Mexico 88240 Reasons) for more difference (ax) Other (Please explain) New Weil Obanae in Fransporter of: Promise in Clampion of Gas Condensate Obtanae in Clampion of Gas Condensate July 1, 1979. If change of ownership give name and address of previous owner	from
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Change in Condensate July 1, 1979.	
If change of ownership give name and address of previous owner	
UDESCRIPTION OF WELL AND LEASE	
Lease Jame Verl No. Poel Name, Including Formation Kind of Lease	jease 10.
SETTLE Eumont 93 Eumont Jucan Gas State, Federal or Fee	
Unit Letter_B_660_Feet From The North Line and 1980_Feet From The Ea	st
22 225 325 424	County
DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Maine at Autoprized Transporter of Cil or Congensate Address (Give address to which approved copy of thi	s form is to be sent;
Name of Autogrizan Transporter of Casingneed Gas or Dry Gas 😿 Address (Give address to which approved copy of thi	s form is to be sent.
Name of Authorized Transporter of Casingneed Gas or Dry Gas X Address (Give address to which approved copy of the	
Control Sec. Twp. Re. Is gas actually connected? When	
tf well produces oil or liquids, only occi (1991 - 1991 - 1991 - 1991 - 1991 - 1991 - 1991 - 1991 - 1991 - 199	
give location of tarks.	<u></u>
If this production is commingled with that from any other lease or pool, give commingling order number:	
COMPLETION DATA Off Well Gas Well New Well Workover Deepen Plug Back	Same Resty, Diff. Resty.
Designate Type of Completion $-(X)$	r i
Date Spucces Date Compl. Ready to Prod. Total Depth P.B.T.D.	
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation Top Oil/Gas Pay Tubing Dept	h
Perforations Depth Casin	.g Shoe
TUBING, CASING, AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE DEPTH SET SA	CKS CEMENT
V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be en	qual to or exceed top allow
OIL WELL able for this depth of de for full 24 hours)	
Date First New Cil Run To Tanks Date of Test Producing Method (Flow, pump, gas lift, etc.)	
Length of Test Turing Pressure Casing Pressure Choke Size	
Actual Pros. During Test Oll-Bbis. Water-Bbis. Gas-MCF	
GAS WELL Advised Freed Freed Freed Freed Freed Bbls, Condensate/MMCF Gravity of C	
Actual Prod. Test-MCF/D Length of Test Bbls. Condensate/MMCF Gravity of C	
Testing Method (pitot, back pr.) Tubing Pressure (Shut-in) Casing Pressure (Shut-in) Choke Size	
VI. CERTIFICATE OF COMPLIANCE OIL CONSERVATION COM	MISSION
	/
I hereby certify that the rules and regulations of the Oil Conservation APPROVED	, 19
Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief. BY	7
Supervisor	
This form is to be filed in compliance w	with RULE 1104.
If this form is to be filed in completion of this form is to be filed in completion of this form must be accompanied by a taken well, this form must be accompanied by a taken of the form must be ac	Dulation of the deviation
tests taken on the well in accordance with	RULE IIII
Division Manager All sections of this form must be filled	out completely for allow
(Title) Bull 2 5 1979 (Title) Fill out only Sections I, II, III, and V	7 for changes of owner
	ance cumule of condition
NMOCD (5) NMPU Fulls Separate Forms C-104 must be filed f	or each pool in multipl
(completed wells.	