1.	NO. OF COPIES RECEIVED DISTRIBUTION SANTA FE FILE U.S.G.S. LAND OFFICE I RANSPORTER OIL GAS OPERATOR PROPATION OFFICE Operator MARTINDAL PITROLIUM Address P. O. BOX 1955, HOBBS	REQUEST I	DNSERVATION COMMISSION FOR ALLOWABLE AND NSPORT OIL AND NATURAL GA	Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65 S
	Reason(s) for filing (Check proper box) New Well A Recompletion Change in Ownership	Change in Transporter of: Cil Dry Gas Casinghead Gas Conden	sate	115 <u>181</u> 210N 5 3 8-4970
	and address of previous owner	DESIGNATION DESIGNATION	<u>* ***********************************</u>	
11.	DESCRIPTION OF WELL AND L Lease Name Peter State	EASE Well No. Pool Fore Including For 1 Drinkard		
	Unit Letter0;660	Feet From The South Line	e and <u>1980</u> Feet From The	East
	Line of Section 32 Town	nship 203 Range	38E , NMPM, Le	County
111.	DESIGNATION OF TRANSPORT Name of Authorized Transporter of Cil Navajo Crude Oil. Purch Name of Authorized Transporter of Cast	or Condensate 🗌 asing	S Address (Give address to which approved Box 175, Arthosia, IM & Address (Give address to which approved	3210
	Getty Oil Company		Box 3000, Tulsa, OK 741	Í
	If well produces oil or liquids, (Tent give location of tanks.	J 32 200 200		soon as possible
	If this production is commingled with COMPLETION DATA Designate Type of Completion	Oii Well Gas Well		Plug Back Same Res'v. Diff. Res'v.
	Date Spudded	Date Compl. Ready to Prod.		P.B.T.D.
	10/26/80	12/24/80	7097 ^I Tcp Oil/Gas Pay	7041' Tubing Depth
	Elevations (DF, RAB, RT, GR, etc.) 3488-4091	Name of Producing Formation Drinkard	68001) jez, l
	Perforations 6300', 6301', 6302', 6304', 6308', 6881' & 6892'			
	TUBING, CASING, AND		CEMENTING RECORD	
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET 14061	725sx
	7-7/8"	5211 2-3/8"	70981	2250 sx
		2-3/8"		
v.	TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allow- able for this depth or be for full 24 hours)			
	Date First New Cil Run To Tanks Date of Test		Producing Method (Flow, pump, gas lift, etc.) Pump	
	12/15/80	Tubing Pressure	Casing Pressure	Choke Size
	24 hrs.		Water - Bbls.	Gas - MCF
	Actual Prod. During Teat	ол-выя. 58	TSTM	180
	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
	Teating Method (pitot, back pr.)	Tubing Preseure (Shut-in)	Casing Pressure (Shut-in)	Choke Sixe
VI.	I. CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION	
	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.		1 Built Marshall Batter Content	
	Juto Anduskin		This form is to be filed in compliance with RULE 1104. If this is a request for sllowable for a newly drilled or despendence well, this form must be accompanied by a tabulation of the deviation test taken on the well in accordance with RULE 111.	
	(Signature) Agent			
	(Title)		All sections of this form must be filled out completely for allow able on new and recompleted wells.	
	December 2	A second s	Fill out only Sections I, 11, III, and VI for changes of owner Fill out only Sections I, 11, III, and VI for changes of condition well name or number, or transporter, or other such change of condition Separate Forms C-104 must be filed for each pool in multiply completed wells.	