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DISTRIBUTIO	ON
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
IRANSPORTER	OIL
INANSPORTER	GAS
OPERATOR	
PRORATION OF	FICE
Operator	
Morr	is R. Antwe
Address	
P. 0	Box 2010
6	(Clark area la

6/26/84

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-104

-	SANTA FE	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-110 Effective 1-1-65	
	FILE		AND		
	U.S.G.S.	_ AUTHORIZATION TO TRA	INSPORT OIL AND NATURAL G	SAS	
ļ	LAND OFFICE	_			
	TRANSPORTER OIL	-			
	OPERATOR GAS	-			
	PRORATION OFFICE	-			
1.	Operator	<u> </u>			
	Morris R. Antwe	eil			
	Address				
	P. O. Box 2010, Hobbs, NM 88241				
	Reason(s) for filing (Check proper box		Other (Please explain)		
	New Well	Change in Transporter of:			
	Recompletion X	Oil Dry Ga	rs		
	Change in Ownership	Casinghead Gas Conder	nsate		
	If change of ownership give name and address of previous owner				
	and address of previous owner				
II.	DESCRIPTION OF WELL AND	LEASE			
	Lease Name	Well No. Pool Name, Including F		-	
	Louie	2 West Nadine B	Slinebry State, Federa	rl or Fee –	
	Location				
	Unit Letter L ; 1980 Feet From The South Line and 860 Feet From The West				
	_	0.0 %	-		
	Line of Section 5 To	wnship 20S Range	38Е , ммрм, Lea	County	
111.	DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL GA	Address (Give address to which appro	wed copy of this form is to he sent!	
	Name of Authorized Transporter of Oi		1		
	The Permian Corporat	tion usinghead Gas 🕱 or Dry Gas	P. O. Box 1183, Hou Address (Give address to which appro	SLOR, IA //UU1 oved copy of this form is to be sent)	
	1		1		
	Warren Petroleum Con		P. O. Box 1589, Tul	sa, UK /41UZ	
	If well produces oil or liquids,	Unit Sec. Twp. Age.		nen .	
	give location of tanks.	L 5 20S 38E	Yes		
	If this production is commingled w	ith that from any other lease or pool,	give commingling order number:		
IV.	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Resty. Diff. Resty.	
	Designate Type of Completi	ion - (X)	1 1		
		Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
	Date Spudded		•		
	6/5/84 Elevations (DF, RKB, RT, GR, etc.)	6/18/84 Name of Producing Formation	7150' Top Oil/Gas Pay	Tubing Depth	
	3583' GR	Blinebry	5930'	5869 Depth Casing Shoe	
	Perforations	1 1 \		7150	
	5930' - 5934' (5 1	holes)	D CEMENTING RECORD	/130	
	UOL 5 5175	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
	12 1/4"	8 5/8"	1500'	750	
	7 7/8"	5 1/2"	7150'	675	
	1 1/6	2 3/8"	5869'	- 075	
		2 3/0	3007		
		COD ALLOWARIE (T	-for	l and must be equal to or exceed top allow	
V	TEST DATA AND REQUEST I	able for this d	after recovery of total volume of load of lepth or be for full 24 hours)	t and mast be equal to or exceed top associ	
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas l	lift, etc.)	
	6/18/84	6/23/84	Pump		
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
	24 hrs	_	_	_	
	Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	Gas-MCF	
		34.9	3	66	
	1				
	GAS WELL				
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
		_			
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
v	. CERTIFICATE OF COMPLIA	NCE	OIL CONSERVATION COMMISSION		
V 1	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. Aug		11.131 0 % 40 % 4		
			APPROVED JUN 27 1984 19		
			1 k		
			BY ORIGINAL SIGNED BY JERRY SEXTON DISTRICT ! SUPERVISOR TITLE		
			This form is to be filed in compliance with RULE 1104.		
			If this is a convert for allowable for a newly drilled or deepened		
			mall this form must be accome		
	Agent		tests taken on the well in accordance with RULE 111.		
	Agent		All sections of this form must be filled out completely for allow-		

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

RECEIVED

JUN 271984

O.C.D. HOSUS OFFICE 1