	· · · · · · · · · · · · · · · · · · ·			
DISTRIBUTION				
SANTA FE	NEW MEXICO OIL		- CONSERVATION COMMISSION	N
FILE	REQUES		ST FOR ALLOWABLE	N Form C+1/4 Supersedes Old C+104 and C
U.S.G.S.	<del></del>		AND	Effective
LAND OFFICE	. AUTHOR	IZATION TO T	RANSPORT OIL AND NATU	RAL GAS
BANSBOOT OIL				
RANSPORTER L. GAS				
OPERATOR				
PRORATION OFFICE				
.pwrater				
	S PRODUCTION CON	1PANY		
Address 810 Houston	Street, Suite 20	000, Fort Wo	orth, TX 76102	
Reason(s) for filing (Check proj	er box)		Other (Pleuse explui	
New Well	Change in Tr	ansperter of:	Omer Trease explai	n) _
in companies	eii.	Dry	Çrts	
Minde in Tweership X	Casinghead (	Gas Cons	densate	
If change of ownership give n	Crown Centr	al Petroleu	m Corporation	
and address of previous owner	4000 N. Biç	Spring, Su	ite 213, Midland, TX	79705
II. DESCRIPTION OF WELL .	AND LEASE	Well No.   Pool to	Jame, Including Formation	
LEONARD			st Nadine (Blinebry)	Kind of Lease
Cocutton	990		or madrile (Birmebry)	State, Federal or Fee Fee
Unit Letter B;		North L	ine andFeet	From The East
Line of Section 7	, Township 20S	Range	38E , <sub>NMPM</sub> ,	Lea
II. DESIGNATION OF TRANS	DODTED OF OUR AND			County
II. DESIGNATION OF TRANS  Name of Authorized Transporter	of Cil X or Conde	D NATURAL G	AS	
Pride Pipeline Compa			Address (Give address to which	approved copy of this from is to be sent)
Name of Authorized Transporter	of Casinghead Gas 🔀	or Dry Gas	P. O. Box 2436, Ab	ilene, TX 79604
Texaco <del>Petroleum Cor</del>	poration A	-2 ( as	Address (Give address to which	approved copy of this form is to be sent)
If well produces oil or liquids,	Unit Sec.	Twp. Rge.	P. O. Box 1137, Eulis gas actually connected?	
give location of tanks.	B	20S 38E	Yes	When
If this production is commingle	ed with that from any of	<u> </u>	, give commingling order number	April 24, 1986
V. COMPLETION DATA			, give commingling order number	r:
Designate Type of Comp	oletion = (X)	eli Gas Well	New Well Workover Deep	en Plug Back Sum= Restv. Diff. Rest
Date Spudged	Date Compl. Ready			
	Date Compt. Reday	to Prod.	Total Depth	P.3.T.D.
Pool	Name of Producing	Formation	T- CH/O	
	11 (10 3 2 5 1 1 9	. ormation	Top Gil/Gas Pay	Tubing Depth
Perforations				
				Depth Casing Slice
	TUBI	NG, CASING. AN	D CEMENTING RECORD	
HOLE SIZE	CASING & T	UBING SIZE	DEPTH SET	SACKS COUR
				SACKS CEMENT
TUCT DAME				
TEST DATA AND REQUES OIL WELL	T FOR ALLOWABLE	(Test must be a	ifter recovery of total volume of loa	d oil and must be equal to or exceed top allo
Date First New Oil From To Tanks	Date of Test	able for this di	111 - 00 100 100 24 100031	
	0 21.3 01 1 .31		Producing Method (Flow, pump, g	gas lift, etc.)
Length of Test	Tubing Pressure		Casing Pressure	
			Custing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.		Water+Bbis.	Gas - MQf
				Gus - ingr
CACHEL				
GAS WELL Actual Prod. Test-MOF TO				
	Length of Test		Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pito, back pr.)	(Full - 1)			
(pack, pack pr.)	Tubing Pressure		Casing Pressure	Choke Size
. CERTIFICATE OF COMPLI	18/01			
· COMPLI	ANUE		OIL CONSE	7 2 5 1988 MISSION
I hereby certify that the rules a	nd templations of the m	:1.6-		
Commission have been complis	regulations of the O		APPROVED	, 19
autive is thus and committee :	ed with and that the in		! <b> </b> ! :	
/	ed with and that the in the best of my knowle		BY ORIGINAL SI	
/ / / / / / / / /	ed with and that the in the best of my knowle		BY ORIGINAL SI	GNED BY JERRY SEXTON

Vand D. Vennerberg, II

(Title) 12-31-87 (Date)

Land Manager (Vignature)

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

If this is a request for allowable for a newly drilled or deepene well, this form must be accompanied by a tabulation of the deviatio tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allow able on new and recompleted wells.

Fill out Sections I, II, III, and VI only for changes of owner well name or number, or transporter, or other such change of condition

