NO. OF COPIES RECEIVED			
CISTRIBUTION	NEW MEXICO OIL	CONSERVATION COMMISSION	Form C-104
SANTA FE	REQUES	T FOR ALLOWABLE	Supersedes Old C-104 and C Effective 1-1-65
FILE		AND	
U.S.G.S.	AUTHORIZATION TO T	RANSPORT OIL AND NATURAL	L GAS
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TRANSPORTER GAS	• •		
OPERATOR		100 Aug. 2010 C. 1990 Aug. 1990	
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Address	KATAN AND AND AND AND AND AND AND AND AND A		
P. O. Box 1416, Ro:	swell, New Mexico		
Reason(s) for filing (Check proper b	20x)	Other (Please explain)	
New Well	Change in Transporter of:		
heromy letion			
Thomae in Ownership	Casinahead Gas Cor	idensate	
f change of ownership give name and address of previous owner			
DESCRIPTION OF WELL AN	D LEASE	Name, Including Formation	Kind of Lease
Lease Hame Riliott "A"		linebry Oil	State, Federal or Fee <b>Federa</b>
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l ine of Dection <b>21</b> ,	Township <b>218</b> Hange	37E , NMPM,	Lea Count
DESIGNATION OF TRANSPO	Cil Condensate	GAS Address (Give address to which ap	pproved copy of this form is to be sent)
Name of Authorized Transporter of		P. O. Boy 900, Dalls	as. Toyas
Magnolia Pipe Line	Company	P. O. Box 900, Dalla Address (Give address to which ap	<b>as, Texas</b> pproved copy of this form is to be sent)
Nagnolia Pipe Line	Company	Address (Give address to which ap	pproved copy of this form is to be sent)
Magnolia Pipe Line Mare of Authorized Transporter of Skelly Oil Co.	Company	Address (Give address to which ap P. O. Box 1650, Tul	pproved copy of this form is to be sent) <b>sa, Oklahoma</b> When.
Nagnolia Pipe Line	Company Cosinghead Gas or Dry Gas	Address (Give address to which ap <b>P. O. Box 1650, Tul</b> Is gas actually connected?	pproved copy of this form is to be sent) <b>sa, Oklahoma</b>
Magnolia Pipe Line Mare of Authorized Transporter of Skelly Oil Co. If well produces oil or liquids, give location of tanks.	Company Casinghead Gas cr Dry Gas Unit Sec. Twp. Age. H 21 21S 37E	Address (Give address to which ap <b>P. O. Box 1650, Tul</b> is gas actually connected? <b>X</b>	pproved copy of this form is to be sent) <b>sa, Oklahoma</b> When.
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Nagnolia Pipe Line Nare of Authorized Transporter of Skelly Oil Co. If well produces oil or liquids, give location of tanks. If this production is commingled COMPLETION DATA Designate Type of Comple Late Spudded 1-26-52 Recompleted 2-25-65 Blinebry Feriorations 2-3/4* holes at each HOLE SIZE 172* 122* 7-7/8* TEST DATA AND REQUEST OII. WELL Late First New Oil Hun To Tanks 2-18-65 Length of Test 24 hrs. Actual Fred. Laring Test 312 Bbls	Company Cosinghead Gas cr Dry Gas Unit Sec. Twp. Age. H 21 21S 37F with that from any other lease or po Oil Well Gas Wel etion - (X) X Date Compl. Ready to Fred. 2-25-65 Name of Producing Formation Blinebry of the following Interva TUBING, CASING, CASING & TUBING SIZE 13-3/8" csg. 9-5/8" csg. 5-1/2" csg. 2-3/8" tbg. FOR ALLOWABLE (Test must able for thi Date of Test 2-25-65 Tubing Pressure 500# Oil-Bbls.	Address (Give address to which ap P. O. Box 1650, Tuli Is gas actually connected? I say actually connected? I New Well Workover Deepen Total Depth 7845 Top Oil/Gas Pay 5687 5804, 5814, 5835, als: 5855 & 5865 AND CEMENTING RECORD DEPTH SET 240 2938 7840 5772 be after recovery of total volume of load is depth or be for full 24 hours) Froducing Method (Flow, pump, go Flow Casing Pressure Pkr (Single Comp.) Water-Bbls.	proved copy of this form is to be sent) <b>sa, Oklahoma</b> When  Diug Back Same Bes'v. Diff. Re  L P.B.T.D.  5890  Tubing Depth 5772  Depth Casing Shoe 7840  SACKS CEMENT  300 1650 395 I oil and must be equal to or exceed top an as lift, etc.)  Choke Size 18/64 Gas-MCF
Nagnolia Pipe Line Name of Authorized Transporter of Skelly Oil Co. If well produces oil or liquids, give location of tanks. If this production is commingled COMPLETION DATA Designate Type of Comple Date Spudded 1-26-52 Recompleted 2-25-65 Blinebry Feriorations 2-3/4* holes at each HOLE SIZE 172* 122* 7-7/8* TEST DATA AND REQUEST OIL WELL Late First New Oil Hun To Tanks 2-18-65 Length of Test 24 hrs. Actual Prod. During Test 312 Bbls GAS WELL	Cosinghead Gas       cr Dry Gas         Unit       Sec.       Twp.       Rgs.         H       21       21S       37E         with that from any other lease or po       Oil Well       Gast Well         etion - (X)       X       Image: Complementation         Date Compl. Recity to Fred.       2-25-65         Name of Freducing Formation       Blinebry         of the following Intervation       Blinebry         of the following & TUBING, CASING,       CASING & TUBING SIZE         13-3/8"       csg.         9-5/8"       csg.         5-1/2"       csg.         2-3/8"       tbg.         CFOR ALLOWABLE       (Test must master able for this able	Address (Give address to which ap P. O. Box 1650, Tuli is gas actually connected? I say actually connected? I New Well Workover Deepen Total Depth 7845 Top Oil/Gas Pay 5687 5804, 5814, 5835, als: 5855 & 5865 AND CEMENTING RECORD DEPTH SET 240 2938 7840 5772 be after recovery of total volume of load is depth or be for full 24 hours) Froducing Method (Flow, pump, go Flow Casing Pressure Pkr (Single Comp.) Water-Bbls. 16	pproved copy of this form is to be sent) <b>se, Oklahoma</b> When <b>6-14-65</b> <b>No</b> Plug Back Same Res'v. Diff. Re <b>X</b> P.B.T.D. <b>5890</b> Tubing Depth <b>5772</b> Depth Casing Shoe <b>7840</b> SACKS CEMENT <b>300</b> <b>1650</b> <b>395</b> I oil and must be equal to or exceed top and as lift, etc.) Choke Size <b>18/64</b> Gas-MCF <b>315</b>
Nagnolia Pipe Line Nare of Authorized Transporter of Skelly Oil Co. If well produces oil or liquids, give location of tanks. If this production is commingled COMPLETION DATA Designate Type of Comple Late Spudded 1-26-52 Recompleted 2-25-65 Blinebry Feriorations 2-3/4* holes at each HOLE SIZE 172* 122* 7-7/8* TEST DATA AND REQUEST OII. WELL Late First New Oil Hun To Tanks 2-18-65 Length of Test 24 hrs. Actual Fred. Laring Test 312 Bbls	Company Cosinghead Gas cr Dry Gas Unit Sec. Twp. Age. H 21 21S 37F with that from any other lease or po Oil Well Gas Wel etion - (X) X Date Compl. Ready to Fred. 2-25-65 Name of Producing Formation Blinebry of the following Interva TUBING, CASING, CASING & TUBING SIZE 13-3/8" csg. 9-5/8" csg. 5-1/2" csg. 2-3/8" tbg. FOR ALLOWABLE (Test must able for thi Date of Test 2-25-65 Tubing Pressure 500# Oil-Bbls.	Address (Give address to which ap P. O. Box 1650, Tuli Is gas actually connected? I say actually connected? I New Well Workover Deepen Total Depth 7845 Top Oil/Gas Pay 5687 5804, 5814, 5835, als: 5855 & 5865 AND CEMENTING RECORD DEPTH SET 240 2938 7840 5772 be after recovery of total volume of load is depth or be for full 24 hours) Froducing Method (Flow, pump, go Flow Casing Pressure Pkr (Single Comp.) Water-Bbls.	proved copy of this form is to be sent) <b>sa, Oklahoma</b> When <b>6-14-65</b> <b>No</b> Plug Back Same Res'v. Diff. Re <b>X</b> P.B.T.D. <b>5890</b> Tubing Depth <b>5772</b> Depth Casing Shoe <b>7840</b> SACKS CEMENT <b>300</b> <b>1650</b> <b>395</b> I oil and must be equal to or exceed top a as lift, etc.) Choke Size <b>18/64</b> Gas-MCF
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Nagnolia Pipe Line Name of Authorized Transporter of Skelly Oil Co. If well produces of or liquids, give location of tanks. If this production is commingled COMPLETION DATA Designate Type of Comple Late Spudded 1-26-52 Recompleted 2-25-65 Blinebry I enterations 2-3/4" holes at each HOLE SIZE 172" 122" 7-7/8" TEST DATA AND REQUEST OIL WELL Late First New Cil Hun To Tanks 2-18-65 Length of Test 24 hrs. Actual Fred. Test-MOF/D Testing Method (pitot, back pr.)	Cosinghead Gas       cr Dry Gas         Unit       Sec.       Twp.       Rge.         H       21       21S       37H         with that from any other lease or po       Oil Well       Gast Well         etion - (X)       X       Image: Cosing Head of the following Formation         Blinebry       Of the following Formation       Blinebry         of the following Interval       CASING & TUBING, CASING,         CASING & TUBING SIZE       13-3/8" csg.         9-5/8" csg.       5-1/2" csg.         2-3/8" bbg.       Crest must able for thi         Date of Test       2-25-65         Tubing Pressure       500#         Oil-Bbls.       296	Address (Give address to which ap P. O. Box 1650, Tuli is gas actually connected? I say actually connected? New Well Workover Deepen Total Depth 7845 Top Oil/Gas Pay 5687 5804, 5814, 5835, als: 5855 & 5865 AND CEMENTING RECORD DEPTH SET 240 2938 7840 5772 be after recovery of total volume of load is depth or be for full 24 hours) Froducing Method (Flow, pump, go Flow Casing Pressure Pkr (Single Comp.) Water-Bbls. 16 Hbls, Condensate/MMCF Casing Pressure	pproved copy of this form is to be sent) <b>se, Oklahoma</b> When <b>6-14-65</b> <b>No</b> Plug Back Same Res'v. Diff. Re <b>X</b> P.B.T.D. <b>5890</b> Tubing Depth <b>5772</b> Depth Casing Shoe <b>7840</b> SACKS CEMENT <b>300</b> <b>1650</b> <b>395</b> <b>a</b> <i>i</i> <i>i</i> <i>i</i> <i>i</i> <i>i</i> <i>i</i> <i>i</i> <i>i</i>
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13383 m B. F. Brawley (Stenature)

(Date)

District Engineer (71

ļ TITLE . This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation 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. Separate Forms C-104 must be filed for each pool in multiply completed wells.