						يعمر			
ı	18 844 817	NEW MEX							
	SANTA FE			1	1464	R			
	FILE							•	
	U.S.G.S.			AUTHO	DRIZA	ATION			
1.	LAND OFFICE				A0111	J. (1 /			
	TRANSPORTER	OIL							
		GAS							
	OPERATOR	1							
	PRORATION OF								
	Operator								
	Petro-Lewis Corporation								
	Address								
	401 Fort Worth Club Bldg., Fe								
	Reason(s) for filing (Check proper box)								
	New Well	Change in Transporter							
	Recompletion	011							
	Change in Ownershi	Casinghead Gas							
H.	If change of owners and address of pre-					SF.			
	I ease Name					Well No.		Name, rin	
	L. G.	War	110	:K		3		T T11	
	Location Unit Letter P			660)	_Feet Fr	om The	. S	
	Unit Letter		- ' -						
	Line of Section	vnshij	$\frac{219}{}$	3					
II.	DESIGNATION (Transpo	orter	of Oll	XX	or	Conden	sate [
	Texas-New	Mex	ico) P:	ipe	Line	e CC) .	
	Name of Authorized			of Car	singh	ead Gas [XX o	or Dry	
	Skelly Oi	1 Co	•					-	
	If well produces of give location of tar	l or liqui iks,	ds,		Uni		î. 19	21	
IV	If this production . COMPLETION I	is comm	ingl	ed wi	th th				
	Designate Ty		Comi	oleti	on		Oil We	111	

(Date)

October 23, 1973

ICO OIL CONSERVATION COMMIL. IN REQUEST FOR ALLOWABLE

Form C-104
Supersedes Old C-104 and C-116
Effective 1-1-65

FILE					AND					
U.S.G.S.				AUTHORIZATION TO TRAN	SPORT OIL AND	NATURAL G	AS			
LAND OFFICE	1 011						i			
TRANSPORTER	GAS	} 								
OPERATOR	GAS									
PROPATION OF	FICE									
Operator										
Petro	-Lewi	is (Cor	poration						
Address		_		of 1 Dill . Death Hair	+h	6102				
401 F	ort V	dor	th	Club Bldg., Fort Wor	th, Texas /	0102	···			
1	(s) for tiling (Check proper box) Change in Transporter of:									
New Well	H			Oil Dry Gas			•			
Recompletion Change in Ownersh				Casinghead Gas Condens	ate					
Change in Ownersh	PLAI									
If change of owner	ship giv	e naπ	ne _D	nrose Production Com	nany, 1605	Commerce	Bldg. FtW	orth Tex.		
and address of pre	vious ov	vner_	10	HIOSE TAXABLE AV.				76102		
. DESCRIPTION	OF WEL	L A	ND L	EASE		Kind of Lease		Lease No.		
Lease Name					mation	State, Federa	Too I			
L. G.	war.	110	K	3 DITHKATA		State, Federa	. 0 00			
Location				0 - 45	330		Fact			
Unit Letter	<u> </u>	. ;	<u>660</u>	Feet From The South Line	and	Feet From "	The <u>Hase</u>			
	18		_	nahin 21S Range	37E , NMP	м.	Lea	County		
Line of Section	10		Town	nship ZIS Range	EFFECI	IVE JANUA	RY 31, 1977,			
DECICNATION	OF TP	NCP	ORT	ER OF OIL AND NATURAL GAS			ANY MERGED			
Name of Authorize	d Transpo	orter o	1 011	XX or Condensate	Vadiose (order awaren	Blank h Gillo	COMPANNIS form is	to be sent)		
Texas-Nev	Mex	ico	Pi	pe Line Co.	P. O. Box	1510, Mi	ldland, Texa	s /9/01		
Name of Authorize	d Transpo	orter o	f Casi	Inghead Gas XX or Dry Gas			ved copy of this form is			
Skelly Of					P. O.Box 1650, Tulsa, Okla. 74101					
If well produces of				Unit Sec. Twp. Rge. A 19 21S 37E	Is gas actually conne	cted? Wh	1955			
give location of ta	nks,			1	yes	 				
If this production	is comm	ingle	d with	h that from any other lease or pool, a	give commingling ord	er number:	PC-209			
COMPLETION	DATA_			Oil Well Gas Well	New Well Workove		Plug Back Same Re	s'v. Diff. Res'v.		
Designate T	vne of (Comp	letio		1	1		į		
				Date Compl. Ready to Prod.	Total Depth		P.B.T.D.			
Date Spudded										
Elevations (DF, R	KB, RT,	GR, e	tc.j	Name of Producing Formation	Top Oil/Gas Pay		Tubing Depth			
							David Contra Shop			
Perforations							Depth Casing Shoe			
	TUBING, CASING, AND					SET	SACKS CE	MENT		
HOL	ESIZE			CASING & TUBING SIZE	DEFIN	361				
			100 174	OD ALLOWARIE (Test must be as	iter recovery of total v	olume of load oi	l and must be equal to o	r exceed top allou		
V. TEST DATA A	ND REC	for:)1 F	able for this de	pth or be for full 24 ho	ura /				
Date First New O	il Run To	Tank		Date of Test	Producing Method (F	low, pump, gas i	lift, etc.)			
							Choke Size			
Length of Test				Tubing Pressure	Casing Pressure		Gas + MCF			
				1	Water - Bbis.					
Actual Prod. Duri	ng Test			Oil-Bbls.	Hatter - Boss					
						<u>-</u>				
GAS WELL	GAS WELL Actual Prod. Test-MCF/D Length of Test				Bbls. Condensate/M	MCF	Gravity of Condense	it•		
Actual Prod. Tee	N-MCF/L	,		Zong or root						
Testing Method (nitot, bac	k pr.)		Tubing Pressure (Shut-in)	Casing Pressure (S)	ut-in)	Choke Size			
t detting wetwer t	I defind Memor I brook on									
	OF OF	OMB	TAN	CE	011	_ CONSERV	ATION COMMISS	ON		
VI. CERTIFICATI	S OF C	OMP I	PIMIA					10		
9 handen	thet the	7311 4 4	. and	regulations of the Oil Conservation	APPROVED					
Commission has	tuat the	comp	lied	with and that the information given	By		An Allay Annay			
Commission have been complied with and that the information general above is true and complete to the best of my knowledge and held for above is true and complete to the best of my knowledge and held for above is true and complete to the best of my knowledge and held for above is true.						<u>-</u>				
1 -	1 . 0					to be filed in	n compliance with Ri	LE 1104.		
$\mathcal{L}I$ \mathcal{Q}	Agent (Signature)					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 allowable on new and recompleted wells.				
720										
Agent					11	of this form	must be filled out com	apletely for allo		

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