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LAND OFFICE			
IRANSPORTER	OIL		
	GAS		
OPERATOR			

IEW MEXICO OIL CONSERVATION COMMISSI

Form C-104

	FILE	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-11 Effective 1-1-65			
	U.S.G.S.	AUTHORIZATION TO TRA	AND ANSPORT OIL AND NATURAL				
	LAND OFFICE		SE SE SE ARD RATURAL	- 000			
	I RANSPORTER GAS						
	GAS OPERATOR						
1.	PRORATION OFFICE						
	Operator TRYAS CRIMP OTT	CONTRA NO					
	TEXAS CRUDE OIL COMPANY						
		East, Midland, Texas 79					
	Reason(s) for filing (Check proper box)		Other (Please explain)				
	New Well Recompletion	Change in Transporter of: Oil Dry Ga		5 1 7 1 1 5 TO B4070			
	Change in Ownership	Casinghead Gas Conder		The state of the s			
	If change of ownership give name	Tale					
	and address of previous owner	no	200 5				
11.	DESCRIPTION OF WELL AND	LEASE	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1				
	Lease Name	Weil No. Pool Name, Including F	ormation Kind of Le	State D-220 1			
	KINCHELOE"2"STATE	1 Hardy Blinel	State, Fed	eral or Fee State B-229-1			
		980 Feet From The South Lin	e and 1980 Feet Fro	m The West			
	Unit Letter ; 1		e and 1980 Feet Fro	m The			
	Line of Section Two Tow	vnship 218 Range 3	6E , NMPM,	Les County			
11	DESIGNATION OF TRANSPORT	PED OF OU AND NATURAL CA	.c				
	Name of Authorized Transporter of Oll	or Condensate	Address (Give address to which ap	proved copy of this form is to be sent)			
	THE PERMIAN CORPORATION		Box 1183, Hauston, To				
	Name of Authorized Transporter of Cas	singhead Gas or Dry Gas	Address (Give address to which ap)	proved copy of this form is to be sent)			
	no gas connection	Unit Sec. Twp. P.ge.	Is gas actually connected?	When:			
	If well produces oil or liquids, give location of tanks.	S 2 21S 36E	no				
	If this production is commingled wit	h 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 Completio		X ,	Trust Back Same New V.			
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.			
	5-29-72 Elevations (DF, RKB, RT, GR, etc.)	6-30-72 Name of Producing Formation	6361 Top Cil/Gas Pay	6300 Tuking Depth			
	3519 GR	Blinebry	5700	5731			
	Perforations 5701,09,69;581	1	1	Depth Casing Shoe			
	5871,94;5954,62,65,83,86 and 6009 (Total of 14 holes) 6361						
		TUBING, CASING, AND	DEPTH SET	SACVE CENENT			
	HOLE SIZE	9 5/8"	1292	SACKS CEMENT			
	8 3/4 ^H	7" 00	6361	416			
		2 3/8"	5731				
			<u> </u>				
V.	TEST DATA AND REQUEST FOOLL WELL		fter recovery of total volume of load (pth or be for full 24 hours)	oil and must be equal to or exceed top allow-			
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas	ilift, etc.)			
	7-5-72	7-14-72 Tubing Pressure	Plowing Casing Pressure	Choke Size			
	Length of Test 24 hours	40-200#	Packer	26/64			
	Actual Prod. During Test	Oil-Bbis.	Water - Bbls.	Gas-MCF			
	105 bbls fluid	75	30	138.75			
	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			
. ,-	OPPORTO AND OR COURT 1431	<u> </u>	OIL CONSER				
VI.	CERTIFICATE OF COMPLIANC	TIFICATE OF COMPLIANCE		1 4 197			
	I hereby certify that the rules and r	egulations of the Oil Conservation	APPROVED 19 19/12 , 19				
	Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		TITLE This form is to be filed in compliance with RULE 1104.				
	In Kittle	Talina	If this is a request for al	lowable for a newly drilled or deepened			
	(Signal	itwe)	well this form must be accou	apanied by a tabulation of the deviation			
	DISTRICT SUPERINTE	•	tests taken on the well in ac	cordance with RULE 111. must be filled out completely for allow-			
	(Tit	le)	able on new and recompleted wells.				
	July 17, 1972	10)	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.				
	(Da	• • /	well name or number, or transporter, or other such change of condition.				

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 completed wells.

JUL 10 17.2

OIL CONSERVATION () :