

SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PRORATION OFFICE			

REQUEST FOR ALLOWABLE
AND
AUTHC LATION TO TRANSPORT OIL AND NAT AL GAS

Supersedes Old C-104 and C-110
Effective 1-1-65

Operator MEWBOURNE OIL COMPANY	
Address 330 Citizens Bank Building, Tyler, TX 75702	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input checked="" type="checkbox"/>	Testing Allowable 80 Wbls.
Recompletion <input type="checkbox"/>	
Change in Ownership <input type="checkbox"/>	
Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	

If change of ownership give name and address of previous owner

DESCRIPTION OF WELL AND LEASE		Lease No.
Lease Name State "F"	Well No. 1	Pool Name, Including Formation Jalmat (Yates-Seven Rivers)
Kind of Lease State, Federal or Fee		State
Location Unit Letter G ; 1650 Feet From The East Line and 1980 Feet From The North		Lease No. K-4127
Line of Section 36 Township 21 S Range 35 E , NMPM, Lea		County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS		Address (Give address to which approved copy of this form is to be sent)	
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Permian Corporation	P. O. Box 1183, Houston, TX 77001	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>		Address (Give address to which approved copy of this form is to be sent)	
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.
	Pge.	Is gas actually connected?	When

If this production is commingled with that from any other lease or pool, give commingling order number:

COMPLETION DATA		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Designate Type of Completion - (X)		X							
Date Spudded 3-25-77	Date Compl. Ready to Prod. 7-22-77	Total Depth 3943	P.B.T.D.						
Elevations (DF, RKB, RT, GR, etc.) 3613 GR	Name of Producing Formation	Top Oil/Gas Pay 3614	Tubing Depth						
Perforations 3614, 40 52, 66, 72, 87, 94, 3714, 20, 29, 52, 56, 64, 70, 82, 88, 95, 3800, 12, 16, 28, 39, 45, 52, 62, 67		Depth Casing Shoe							
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT						
8-5/8"	24#	363	250 + 80 circ.						
4-1/2"	11.6	3935	400-C1 C 325 + 200 C1 C + 50 circ.						

TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL		(Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for 24 hrs depth or be for full 24 hours.)	
Date First New Oil Run To Tanks 6-16-77	Date of Test 7-22-77	Producing Method (Flow, pump, gas lift, etc.) flowing	
Length of Test 8 hrs	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test 1.66	Oil-Bbls. 1.66	Water-Bbls. trace	Gas-MCF 0

GAS WELL		Bbls. Condensate/MMCF	Gravity of Condensate
Actual Prod. Test-MCF/D	Length of Test		
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

CERTIFICATE OF COMPLIANCE

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.

Margaret Lotz
(Signature)
Production Clerk
(Title)
September 20, 1977
(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19____

BY _____

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 allowable on new and recompleted wells.

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.

RECEIVED

1957-10-15

U.S. DEPARTMENT OF AGRICULTURE
WASHINGTON, D.C.