	NO. OF COPIES RECEIVED					
	DISTRIBUTIO					
	SANTA FE					
	FILE					
	U.S.G.S.					
	LAND OFFICE					
	TRANSPORTER	OIL				
		GAS				
	OPERATOR					
I.	PRORATION OFFICE					
	Operator					
	Wood, McShane &					
	Address					
	P. O. B	ox 9	68,	M		
	Reason(s) for filing (Check proper box					
	New Well					

Partner

July 1, 1971

(Title)

(Date)

Form C-104

	SANTA FE		FOR ALLOWABLE	Supersedes Old C-104 and C-110			
	FILE	AND Effective 1-1-65					
]	U.S.G.S. AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS						
ļ	LAND OFFICE						
	TRANSPORTER OIL						
	OPERATOR GAS						
	PRORATION OFFICE						
1.	Operator		u				
Wood, McShane & Thams 692, Ltd.							
	Address						
	P. O. Box 968, Mo	onahans, Texas 797'					
	Reason(s) for filing (Check proper box)		Other (Please explain)				
	New Well	Change in Transporter of:					
	Recompletion	Oil Dry Gas	· [_]				
	Change in Ownership X	Casinghead Gas Condens	sate				
	If change of awaership give name			60 M 1			
	If change of ownership give name Wo and address of previous owner	ood, McShane & Thams	- Colorado Box 9	68, Monahans, Texas			
11.	DESCRIPTION OF WELL AND LEASE Lease Name Well No. Pool Name, Including Formation Kind of Lease Lease No.						
	New Mexico M State 25 Langlie Mattix State, Federal or Fee State B-934						
	Location New Please II Bear	25 Langite nav					
	_	30 Feet From The South Line	e and 660 Feet From 7	the West			
	Unit Letter L : 190	OU Feet From The DOUCH Ellie	dad				
	Line of Section 29 Tow	nship 22-S Range	37-E , NMPM,	Lea County			
	Eme of osettin.						
ш	DESIGNATION OF TRANSPORT	ER OF OIL AND NATURAL GA	s				
	Name of Authorized Transporter of Oil	X or Condensate	Address (Give address to which approx	ped copy of this form is to be sent)			
	Texas New Mexico	Pipe Line Company	Box 1510, Midland Address (Give address to which approx	, Texas			
	Name of Authorized Transporter of Cas	inghead Gas X or Dry Gas	Address (Give address to which approv	ped copy of this form is to be sent)			
	Skelly Oil Compar	ny	Eunice, New Mexic				
	If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected? Whe	1			
	give location of tanks.	C 29 22-S 37-E	Yes	5-28-61			
If this production is commingled with that from any other lease or pool, give commingling order number: EFFECTIVE JAN							
IV.	V. COMPLETION DATA SKELLY OIL COMPANY MER						
Designate Type of Completion - (X) Oil Well Gas Well New Well Workover Deepen Plug Back Saffer New Well Oil Completion Oil							
			Total Depth	P.B.T.D.			
	Date Spudded	Date Compl. Ready to Prod.	Total Beptil				
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth			
	Elevations (Dr., RRB, R1, GR, etc.)	Ivalie of Fradering 1 disserted					
	Perforations			Depth Casing Shoe			
	Perforditions						
	. TUBING, CASING, AND CEMENTING RECORD						
	HCLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT			
	11022 0.22						
•							
				<u>.i</u>			
v	TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a	fter recovery of total volume of load oil	and must be equal to or exceed top allow-			
▼ .	OIL WELL	apre joi titta de	epth or be for full 24 hours)	ft. etc.)			
Olf, WF.L.1. Dute First New Oil Run To Tanks Date of Test Producing Method (Flow, pump, gas lift, etc.)							
	The state of the s		Casing Pressure	Choke Size			
	Length of Test	Tubing Pressure	Casing Prossure				
		Oil-Bbls.	Water-Bbis.	Gas - MCF			
	Actual Prod. During Test	Oli-Bala.					
			<u> </u>				
	0.10.1157						
	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate			
	Actual Prod. 1981 MCF/D	Long. of 100.					
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size			
	resund Method (pitot, out pri)						
		ATION COMMISSION					
VI	CERTIFICATE OF COMPLIANCE		JIL CONSERVA				
				1977], 19			
	Commission house bean complied	regulations of the Oil Conservation with and that the information given		· lon			
	above is true and complete to th	e best of my knowledge and belief.	BY	DISTRICT			
			SUPERV S	TITLE SUPERVS SO MISTRO			
			compliance with BIII E 1104.				
This form is to be filed in compliance with Ru If this is a request for allowable for a newly d well this form must be accompanied by a tabulation							
	- Charles		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

· Jan Carlo

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AUG 21971
OIL CONSERVATION COMM.
HOBBS, N. IA.