NO. OF COPIES REC	EIVED	i	
DISTRIBUTION			
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PROBATION OFFICE			-

DISTRIBUTION SANTA FE	<b>!</b>	OIL CONSERVATION COMMISSIC. Form C-104 UEST FOR ALLOWABLE Supersedes Old C-104 and C-	
FILE		AND	Effective 1-1-65
U.S.G.S.	AUTHORIZATION TO TRA	ANSPORT OIL AND NATURAL	_ GAS
LAND OFFICE			
TRANSPORTER GAS			
OPERATOR  I. PRORATION OFFICE			
Operator	C 771 (00 7 1	······································	
Wood, McShane d	& Thams 692, Ltd.		
P. O. Box 968,	Monahans, Texas 797	756	•
Reason(s) for filing (Check proper t	oox)	Other (Please explain)	
New Well Recompletion	Change in Transporter of: Oil Dry Go		
Change in Ownership X	Casinghead Gas Conde	<b>=</b>	
To all a second and a second a second as a			
and address of previous owner	Wood, McShane & Thams	s - Colorado B	ox 968, Monahans, Texa
II. DESCRIPTION OF WELL AN	DIFASE		
Lease Name	Well No. Pool Name, Including F		2000
New Mexico M St	tate 26 Langlie Ma	attix State, Fed	eral or Fee State B-934
Location	1000	660	T.T.
Unit Letter E ;	1980 Feet From The North Lir	ne and 000 Feet Fro	om The West
Line of Section 29	Township 22-S Range	37-E , NMPM,	Lea County
II. DESIGNATION OF TRANSPO	OIL X or Condensate		proved copy of this form is to be sent)
Texas New Mexic	co Pipe Line Company	Box 1510, Midla	nd, Texas  proved copy of this form is to be sent)
Name of Authorized Transporter of	Casinghead Gas 📉 💮 or Dry Gas 🦳	Address (Give address to which ap	proved copy of this form is to be sent)
Skelly Oil Comp		Eunice, New Mex Is gas actually connected?	ico
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. C 29 22-S 37-E		5-28-61
	with that from any other lease or pool,	<del></del>	
V. COMPLETION DATA			KELLY OU COMPLY ST, 1947,
Designate Type of Comple	tion - (X)	New Well Workover Deepen	NTO GETTY OIL COMPANY.
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Elevations (DF, RKB, RT, GR, etc.	Name of Producing Formation	Top Cil/Gas Pay	Tubing Depth
Perforations		<u> </u>	Depth Casing Shoe
	`		
		D CEMENTING RECORD	SACVE CEMENT
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
		<u> </u>	
V. TEST DATA AND REQUEST		ifter recovery of total volume of load ( epth or be for full 24 hours)	oil and must be equal to or exceed top allow
OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas	s lift, etc.)
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	Gas - MCF
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
	1	011 0011055	VA TION CONTUCCION
VI. CERTIFICATE OF COMPLIA	NCE	OIL CONSER	VATION COMMISSION
I haraby cartify that the rules or	ed regulations of the Oil Conservation	APPROVED 11671 , 19_	
Commission have been complied	ommission have been complied with and that the information given		and a
above is true and complete to	the best of my knowledge and belief.	BY //	
		TITLE CT	A STRICT I
in the	This form is to be filed in compliance with RUL  If this is a request for allowable for a newly dril  (Signature)  well, this form must be accompanied by a tabulation		
to the way			apanied by a tabulation of the deviation
Partnor	gnature)	tests taken on the well in ac	cordance with RULE 111.
<u>Partner</u>	(Title)	All sections of this form able on new and recompleted	must be filled out completely for allow wells.
July 1 1971	•	11	II III and VI for changes of owner,

(Date)

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.

OIL COMPANY SON COMM.