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1.

NEW MEXICO OIL CONSERVATION COMMISSION Form C -104 Supersedes Old C-104 and C-110 REQUEST FOR ALLOWARD FOFFICE D. C. C. Effective 1-1-65 AND AUTHORIZATION TO TRANSPORT & Wood, McShane & Thams - Colorado P. C. Box 968, Monchans, Texas 79756
) for filing (Check proper box) Other (Please explain) Reason(s) Change in Transporter of: New Well Dry Gas Recompletion Condensate Change in Ownership Casinahead Gas If change of ownership give name and address of previous owner ____ Humble Oil & Refining Company Box 1600, Midland, Texas II. DESCRIPTION OF WELL AND LEASE Lease No. Kind of Lease Well No. Pool Name, Including Formation State, Federal or Fee B-934 State 31 Langlie Mattix New Mexico M State Feet From The North Line and 660 Feet From The East --:--660 Unit Letter County , NMPM, Township 72-S Range 37-E Lea Line of Section 30 III. 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 Texas New Mexico Pipe Line Company
e of Authorized Transporter of Casinghead Gas Corp. Or Dry Gas Address (Give courses to which approved copy of this form is to be sent) Eunice, New Mexico Skelly Oil Company Rge. Twp. Is gas actually If well produces oil or liquids, give location of tanks. 5-28-61 29 22-S 37-E Yes If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Plug Back | Same Restv. Diff. Restv. Deepen Gas Well Workover Oil Well New Well Designate Type of Completion - (X) P.B.T.D. Total Depth Date Compl. Ready to Prod. Date Spudded Tubing Depth Top Oil/Gas Pay Name of Producing Formation Elevations (DF, RKB, RT, GR, etc.) Depth Casing Shoe Perforations TUBING, CASING, AND CEMENTING RECORD SACKS CEMENT DEPTH SET CASING & TUBING SIZE HOLE SIZE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours) V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL Producing Method (Flow, pump, gas lift, etc.) Date First New Oil Run To Tanks Choke Size Casing Pressure Tubing Pressure Length of Test Ggs - MCF Water - Bbls. Oil - Bbls. Actual Prod. During Test **GAS WELL** Gravity of Condensate Bbls. Condensate/MMCF Length of Test Actual Prod. Test-MCF/D Casing Pressure (Shut-in) Choke Size Tubing Pressure (Shut-in) Testing Method (pitot, back pr.) OIL CONSERVATION COMMISSION VI. CERTIFICATE OF COMPLIANCE APPROVED 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.

& Olis	(Signature)
Partner	(Title)

TITLE

December 17, 1969

BY

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.

If this production it commungled with that from any other leads or pool, give communging order sumb Ch Well (Inc. Vell (New Well v. confletion 1 ata___ वंद्युक्ति । Pesignate Type of Completion $\omega(X)$ Corr. or ghased Squad servi ខាដ្ឋ**១**១ ខ្ពស់នៅ។ វិ Sec 11 8 104, 16 1, 18 1. (R. cou) TUBING ('ASHIG, AND GEMENTING RECORD Less care Le la transition de la prima de la transition de curada des cares la care de la carega V. TEST DATA AND REQUEST SOR ALLOY SOR Length of Text ានការតែបានប្តី ១០ ខុសភា មិ ខ្លាវនេស្សា VI CERTIFICACE IN COMPLIANCE Louise, complete and the special regions and the explication passes. I Posted the outside and the first balliques are at the outside of the second of the control of the co from 18 to be alled in compliance with Sirk Sirter is the it with the accompanied by a namily draited of despending well toke mint most be accompanied by a tabulation of the deviation tests taken on the well is accordance with MULE 111. िरंडु एका ध्वत All smillons of this form must be filled out completely for allow-14151 T) The confir Sections by W. W. and W. for changes of condition. eligition at look does to boils so must no eligible 1 5 25 ()