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1	NO. OF COPIES RECEIVED					
	DISTRIBUTION		DNSERVATION COMMI	SSION	Form C-104	
	SANTA FE		FOR ALLOWABLE	331014	Supersedes Old C-104 and C-110	
	FILE		AND		Effective 1-1-65	
	U.S.G.S.	AUTHORIZATION TO TRA	NSPORT OIL AND N	IATURAL GAS		
	TRANSPORTER GAS					
	OPERATOR					
I.	PRORATION OFFICE					
	Operator					
	Summit Energy, Inc	•		• • • • • • • • • • • • • • • • •		
	112 North First, A	rtesia. New Mex. 8821	0			
	Reason(s) for filing (Check proper box)		Other (Please		· · · · · · · · · · · · · · · · · · ·	
	New Well	Change in Transporter of:			Lassification	
	Recompletion	Oil Dry Gas		il to gas.		
	Change in Ownership	Casinghead Gas Conden			J	
	If change of ownership give name					
	and address of previous owner					
II.	DESCRIPTION OF WELL AND I	Well No. Pool Name, Including Fo	vrmation	Kind of Lease	Lease No.	
	Lease Name	1 Blinebry Gas		State, Federal or	_	
	Gulf State					
	Unit Letter A;660	Feet From The North Line	e and <u>660</u>	_ Feet From The	East	
				T		
	Line of Section 36 Tow	nship 22S Range	37Е , ммрм,	, Lea	County	
Ш.	DESIGNATION OF TRANSPORT	ER OF OIL AND NATURAL GA	s			
	Name of Authorized Transporter of Oil	or Condensate X	Address (Give address t	o which approved	copy of this form is to be sent)	
	Texas-New Mexico Pipe	inghead Gas or Dry Gas X	P. O. Box 15	<u>10. Midlar</u>	nd, Texas 79701 copy of this form is to be sent)	
	Name of Authorized Transporter of Cas					
	Northern Natural Gas	Unit Sec. Twp. P.ge.	2223 Dodge St Is gas actually connected		Nebr. 08102	
	If well produces oil or liquids, give location of tanks.	A 36 225 37E	Yes	Nov	. 2, 1965	
	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		lug Back Same Res'v. Diff. Res'v.	
	Designate Type of Completio	n = (X)				
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P	P.B.T.D.	
			Top Oil/Gas Pay		ubing Depth	
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		-		
	Perforations		L	D	epth Casing Shoe	
		TUBING, CASING, AND	DEPTH SI		SACKS CEMENT	
	HOLE SIZE	CASING & TUBING SIZE	DEFING			
	<u> </u>					
			ļ			
V.	TEST DATA AND REQUEST FO	OR ALLOWABLE (Test must be a) able for this de	pth or be for full 24 hours	r)	must be equal to or exceed top allow-	
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow	v, pump, gas lift, e	itc.)	
			Casing Pressure		Choke Size	
	Length of Test	Tubing Pressure	Custing Freesame			
	Actual Prod. During Test	Oil-Bble.	Water-Bbls.	c	Gas - MCF	
			<u> </u>			
	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMC	F C	Gravity of Condensate	
	Actual Prod. Test-Mory D					
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut	-in) (Choke Size	
		<u> </u>				
VI. CERTIFICATE OF COMPLIANCE OIL CONSE			LONSERVAT	1972		
	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.		OIL CONSERVATION COMMISSION			
			Orig. Signed by			
	above is true and complete to the	BY	Joe D.	Ramey		
			TITLE Dist. I, Supv.			
	\mathcal{A}	0	This form is to	be filed in con	npliance with RULE 1104.	
	- A and be	White	If this is a request for allowable for a newly drilled or despend well, this form must be accompanied by a tabulation of the deviation			
(Signature)			tests taken on the	tests taken on the well in accordance with RULE 111.		

Division Engineer

December 14, 1971

(Title)

(Date)

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 allow-able 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. Reperate Forms C-104 must be filed for each pool in multiply completed wells.



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OIL CONSERVATIO , COLIM. House, r.

	NO. OF COPIES RECEIVED	REQUEST FO	ISERVATION COMMISSION OR ALLOWABLE AND	Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65	
	FILE U.S.G.S. LAND OFFICE I RANSPORTER GAS OPERATOR		SPORT OIL AND NATURAL GAS	5	
I.	PRORATION OFFICE				
	Summit Energy, Inc.				
	112 N. First Stre Reason(s) for filing (Check proper box)	et Artesia, N. M	• 88210 Other (Please explain)		
	New Well	Change in Transporter of: Oil Dry Gas	X Change of Op Name	erating	
	Change in Ownership			August 1, 1970	
I a	f change of Notestice give name nd address of previous what <u>ODE</u>	Change of operating rator Western	017 Fields, Inc.	August 1 1/10	
	DESCRIPTION OF WELL AND L	EASE	Kind of Lease	Lease No.	
	Lease Name	Well No. Poor Nume, merdanig t	mation Kind of Ledse State, Federal of		
+	Gulf State Com.	1 Tubd			
	-	O_Feet From The North Line	and 660 Feet From Th	e East	
	-	nship 22 Range	37 , NMPM, Lea	County	
Ĺ					
m.	DESIGNATION OF TRANSPORT Name of Authorized Transporter of Oil	COR OF OIL AND NATURAL GAS	Address (Give address to which approve	d copy of this form is to be sent)	
	Permian Corporati	.on	Midland, Texas Address (Give address to which approve	ed copy of this form is to be sent)	
ł	Name of Authorized Transporter of Cast Northern Natural		Hobbs, New Mexico		
		Unit Sec. Twp. Ege.	Is gas actually connected? When	1	
	If well produces oil or liquids, give location of tanks.	A 36 22 37		lot available	
IV.	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 Flug Back Same Res'v. Diff. Res'v.				
	Designate Type of Completio	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
	Date Spudded			D Mars Death	
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
	Perforations			Depth Casing Shoe	
	Fellorations				
		TUBING, CASING, AND CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
	HOLESIZE				
N /	TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a	fter recovery of total volume of load oil other of the second oil of the second of the	and must be equal to or exceed top allow-	
¥.	OIL WELL Date First New Oil Run To Tanks	able for this de	Producing Method (Flow, pump, gas lip	(t, etc.)	
	Date First New Oil Run 16 Tunks			Choke Size	
	Length of Test	Tubing Pressure	Casing Pressure		
	Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas - MCF	
	Actual 7 .001 2				
	·			·	
	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbis. Condensate/MMCF	Gravity of Condensate	
			Casing Pressure (Shut-in)	Choke Size	
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)			
V	I. CERTIFICATE OF COMPLIAN			ATION COMMISSION	
	I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given		APPROVED		
	above is true and complete to the	he best of my knowledge and belief.		* * * * · · · · · · · · · · · · · · · ·	
	Paul sur hite		TITLE This form is to be filed in compliance with RULE 1104.		
	- poul si	Nhile	 If this is a request for allowable for a how, this form must be accompanied by a tabulation of the deviation well, this form must be accordance with RULE 111. All sections of this form must be filled out completely for allowable on new and recompleted wells. 		
	Vice-President P:	-			
	(1)	Title)			

July 20, 1970

(Date)

able 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.



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1.	NO. OF COPIES RECEIVED DISTRIBUTION SANTA FE FILE U.S.G.S. LAND OFFICE I RANSPORTER OIL GAS OPERATOR PRORATION OFFICE Operator Summit Energy, I Address 112 N. First Str Reason(s) for filing (Check proper box) New We!l Recompletion Change in Ownership	REQUEST F AUTHORIZATION TO TRAN no. eet Artesia, N. Change in Transporter of: Oil Dry Gas Casinghead Gas Condens	other (Please explain) X Change of O Name name to be effective	perating
	ODERSTOR If change of comparison of previous of the second and address of previous of the op	erator Western OI	l Fields, Inc.	
11.	DESCRIPTION OF WELL AND I Lease Name Gulf State	LEASE Well No. Pool Name, Including Fo 1 Blinebry 01		r Fee State
	Location (A) (66	O Feet From The North Ine	and 660 Feet From Th	e East
		unship 22 Range	37 , NMPM, Lea	County
		TER OF OIL AND NATURAL GAS	s	
HI.	Name of Authorized Transporter of Oil	T or Condensate	Address (Give address to which approve	
	Permian Corporat	inghead Gas 🛒 or Dry Gas 🗌	Midland, Texas Address (Give address to which approve	d copy of this form is to be sent)
	Warren Fetroleum Co. Unit Sec. Twp. Rge.		Eunice, New Mexico	
	If well produces oil or liquids, give location of tanks.	A 36 22S 37E		ovember 2, 1965
	If this production is commingled wit COMPLETION DATA	th that from any other lease or pool, a		
17.	Designate Type of Completion	on - (X)	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
	Elevations (DF, RKB, RT, CR, etc.,	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
				Depth Casing Shoe
	Perforations			
		TUBING, CASING, AND CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
	HOLE SIZE			
				- J J
V	TEST DATA AND REQUEST F	able for this de	fter recovery of total volume of load oil an pth or be for full 24 hours)	
	Date First New Cil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift,	, etc.j
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size
	Actual Prod. During Test	Oil-Bbla.	Water - Bbls.	Gas-MCF
			<u> </u>	
GAS WELL Gravity Grav		Gravity of Condensate		
	Actual Prod. Test-MCF/D	Length of Test		-
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
VI	VI. 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.		OIL CONSERVATION COMMISSION APPROVED DE 1990, 19 BY HIPLE SUPER 3 PACY D	
Rei micht.			This form is to be filed in c	ompliance with RULE 1104.
	I and M	nature)	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 well, this form well in accordance with BULE 111.	
Vice-President Production		All sections of this form must be filled out completely for allow-		

Vice-President Production (Title)

July 20, 1970 (Date)

	able 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.			
11	completed werte.			



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NO. OF COPIES RECEIVED	,				
DISTRIBUTION SANTA FE		ONSERVATION COMMISSION	Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65		
FILE U.S.G.S. LAND OFFICE	AUTHORIZATION TO TRAN	AND NSPORT, OIL AND NATURAL GAS			
IRANSPORTER GAS					
OPERATOR OPERATOR					
Western Oil Field	s, Inc.				
	Building - Dallas, T	Yexas 75201 Other (Please explain)			
New Woll	Change in Transporter of:				
Recompletion.	Cil Dry Gas Casinghead Gas Condens				
If change of ownership give name and address of previous owner					
II. DESCRIPTION OF WELL AND I	Well No. Fool Nam	ie, morautig i ormanon	nd of Lease		
Gulf State	1 Bli	sto	nte, Federal or Fee State		
Unit Letter A ; 660	Feet From The North Line				
	nship 22S Range	37E , NMPM, Lea	County		
II. DESIGNATION OF TRANSPORT Name of Authorized Transporter of Oil	or Condensate	Address (Give uniters to writer approved t			
Texas-New Mexico I	singhead Gas 🚺 or Dry Gas 🗔	P.O. Box 1510, Midla Address (Give address to which approved	copy of this form is to be sent)		
Northern Natural (If well produces oil or liquids,	Unit Sec. Twp. Rge.	2223 Dodge St., Omah Is gas actually connected?			
give location of tanks.	A 36 228 37E		vember 2, 1965		
IV. COMPLETION DATA	Cil Well Gas Well New Well Workover Deepen Fild Date Same field and the fille				
Designate Type of Completion	on - (X) Date Compl. Ready to Prod.	Total Depth	.B.T.D.		
	Name of Producing Formation	Top Oil/Gas Pay T	ubing Depth		
Perforations			epth Casing Shoe		
Periorations	TUBING, CASING, AND CEMENTING RECORD				
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
V. TEST DATA AND REQUEST F OIL WELL Date First New Oil Run To Tanks					
Length of Test	Tubing Pressure	Casing Pressure	Choke Size		
Actual Prod. During Test	Cil-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	Casing Pressure	Choke Size		
VI CERTIFICATE OF COMPLIAN	CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION		
	I hereby certify that the rules and regulations of the Oil Conservation		APPROVED MON A 1969		
a introduced been complied	I hereby certify that the filles and regulations of the On Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		me		
	· · · · · · · · · · · · · · · · · · ·		TIT/#		
Of the far	11	This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepene			
	ndture) //	well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.			
(1	Division Engineer (Title)		All sections of this form must be filled out completely for allow able on new and recompleted wells. Fill out Sections I, II, III, and VI only for changes of owner		
November 15,	, 1968 Date)	well name or number, or transporter	be filed for each pool in multipl		

Separa		
completed	well	s.