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	DISTRIBUTION			
	SANTA FE		O OIL CONSERVATION COMMISSION Form C-104	
	FILE	Effective 1 h co		Supersedes Old C-104 and C-1 Effective 1-1-55
	<u>┣</u> ╼──── [─] [─] [─] [−]	AND		
	U.S.G.S.	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS		
	LAND OFFICE			
	TRANSPORTER OIL			
	GAS			
	OPERATOR			
I.	PRORATION OFFICE			
	Operator			
	AMERICAN PETROFINA COMPANY OF TEXAS			
	Address			
	Box 1311, Big Spring	, TX 79721		
	Reason(s) for filing (Check proper bo	x)	Other (Please explain)	
	New Wall	Change in Transporter of:		
	Recompletion XX	Oil Dry G	ias	•
	Change in Ownership			
	If change of ownership give name and address of previous owner			·
	DECORPTION OF WELL AND			
	DESCRIPTION OF WELL AND	Well No.; Pool Name, Including I	Formation Kind of L	ease Lease No.
	Edith Butler	5 Drinkar		deral or Fee Fee
	Location			ree
	F 10	80 м	ne and 1980 Fact 7	1.7
	Unit Letter F ; 196	80 Feet From The N Li	ne andFeet Fr	om The
	10		20 5 -	
	Line of Section 18 To	winship 22-S Range	38-Е , ммрм, Lea	County
III.		TER OF OIL AND NATURAL GA		
	Name of Authorized Transporter of Ol		Address (Give address to which a	oproved copy of this form is to be sent)
	Texas-New Mexico Pipe	e Line Company	Box 2528, Hobbs, NM	88240
	Name of Authorized Transporter of Ca	isinghead Gas 💢 or Dry Gas 🚞	Address (Give address to which ap	oproved copy of this form is to be sent)
	Warren Petroleum Com	pany	Box 1589, Tulsa, OK	74102
	If well produces oil or liquids,	Unit Sec. Twp. P.ge.	Is gas actually connected?	When
	give location of tanks.	K 18 22-S 38-E	Yes	6-06-83
	If this production is commingled with that from any other lease or pool, give commingling order number:			
	COMPLETION DATA	the that from any other rease of poor,	give comminging order number.	
		Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.
	Designate Type of Completi	on - (X) X	x	X
	Date Spudded Recompletion	Date Compl. Ready to Prod,	Total Depth	P.B.T.D.
	5-02-83	5-11-83	7124	6840
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
	+3354 (RKB)	Drinkard	6410	
	Perforations		1 0410	6370 Depth Casing Shoe
	6410-6817 (25 holes) 6910 6910			
			······································	
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
	17	13-3/8	137	250
	10-3/4	8-5/8	2858	750
	7-7/8	5-1/2	6910	750
		<u></u>	.i	
V.	TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a		oil and must be equal to or exceed top allow
	DIL WELL able for this depth or be for full 24 hours)			
	Date First New Oil Run To Tanks Date of Test		Producing Method (Flow, pump, gas lift, etc.)	
	May 16, 1983	June 6, 1983	Flow	
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size
	24 hr.	50-200	1050	12/64
	Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
	27	24	3	12.2
1				
	GAS WELL			
ſ	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
ł	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke:Size
i				
ן 10	CERTIFICATE OF COMPLIAN	 CF		VATION COMMISSION
41.	I hereby certify that the rules and regulations of the Oil Conservation			
			APPROVED 19 19	
	I hereby certify that the rules and i Commission have been complied v	vith and that the information gives	APPROVED JUNI 4 4 JOJ BY ORIGINAL SIGNED BY JERRY SEXTON	
	above is true and complete to the best of my knowledge and belief.		BYORIGINAL SIG	NED BT JERRY
			DISTRICT I SUPERIOR	
			This form is to be filed	In compliance with RULE 1104.
	Assistant District Manager of Production		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 allow-	
-				
-	(Title)		All sections of this form able on new and recompleted	wells.
	June 10, 1983		Eith out only Sections I	IT III and VI for changes of owner,
-	(Date) Fill but only Sections 1, 11, 11, and vi but change of c		porter, or other such change of condition.	
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