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U.S.G.S.			
LAND OFFICE			
IRANSPORTER	OIL		
	GAS		
OPERATOR			
PROBATION OFFICE			

Authorized Agent

November 27, 1967

## NEW MEXICO O'L CONSERVATION COMMISSION REQUEST FOR ALLOWABLE

AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65

-						
-	TRANSPORTER OIL					
-	GAS					
	OPERATOR					
1.	PRORATION OFFICE				···· · · · · · · · · · · · · · · · · ·	
	Operator	11				1
	Yuronka & Chand				<del></del>	
	Address		70701			
	120-C Central I	Building, Midland, Texas	79701		<del></del>	
Ī	Reason(s) for filing (Check proper box)		Other (Pleas	e explain)		
	New Well	Change in Transporter of:				
	Recompletion	OII Dry Go	rs			İ
	Change in Ownership	Casinghead Gas Conder	nsate			
L						
1	f change of ownership give name					
á	nd address of previous owner					
II. ļ	DESCRIPTION OF WELL AND I	Well No. Pool Name, Including F	ormation	Kind of Lease	<del></del>	Lease No.
1	Lease Name		_	State, Federal	or Fee	
	Belcher	1 Drinkard	<u> </u>	<u> </u>		<del>ا ۔ ۔ ۔ ۔ ۔ ۔ ۔ ۔ ا</del>
	Location				*** <b>4</b> -	
İ	Unit Letter M; 6	60 Feet From The South Lir	ne and <u>660</u>	Feet From T	ne West	
				_		
	Line of Section 7 Tow	rnship <b>22-S</b> Range	38-E , NMP	i, Le	<u>a</u>	County
i						
	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA	AS			
ш.	Name of Authorized Transporter of Oil	or Condensate	Address (Give address	to which approve	ed copy of this form is to	be sent)
	Admiral Crude Oil C		P.O. Box 1713	, Midland,	Texas 79701	
	Admiral Crute off Con	Inghead Gas or Dry Gas			ed copy of this form is to	be sent)
i	Name of Authorized Transporter of Cas	undurand and Cl. of Dily and Cl.		The second	- · ·	
	No purchaser	,	T	ted? When		
	If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connec	tear wher		J
	give location of tanks.	N 7 22-S 38-E				
1	if this production is commingled wit	h that from any other lease or pool.	give commingling ord	er number:		
		in that from any other rease or poor,	Prio commissione			
٧.	COMPLETION DATA	Oil Well Gas Well	New Well Workover	Deepen	Plug Back Same Res	v. Diff. Res'v.
	Designate Type of Completion	on = (X)	xx	1		į
		Date Compl. Ready to Prod.	Total Depth		P.B.T.D.	<u></u>
	Date Spudded				7231'	
	10-22-67	11-16-67	7300'		Tubing Depth	
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay			
	3357' DF	Drinkard			67721	
	Perforations 6805 - 6826 - 684	Drinkard 61',6872'6907',6931',696	6',6975',6986',	7007,	Depth Casing Shoe	
	7015',7026',7089',7101'	- / 1 1 2 3 1 1 4 2 3			7297'	
	1043 17049 1144	TUBING, CASING, AN	D CEMENTING RECO	RD		
	HOLE SIZE	CASING & TUBING SIZE	DEPTH		SACKS CEM	ENT
		9-5/8"	1296'		565 sxs.	
	12"	9-3/B	7297'		990 sxs.	
	8-3/4"	2"	6772'			
		2"	0112			
v.	TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be	after recovery of total vo	lume of load oil o	and must be equal to or e	xceed top allow
• •	OIL WELL	ante for this a	lepth or be for full 24 hou	rs)	h 1	
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Fl	ow, pump, gas iij	ι, εισ.,	
	11-20-67	11-19 to 11-20-67	Flowing			
	Length of Test	Tubing Pressure	Casing Pressure		Choke Size	
	24	100#	Pk:	c	2"	
	Actual Prod. During Test	Cil-Bbls.	Water - Bbls.		Gas - MCF	
		115	5		TSTM	
	120 bbls.	1.1.1			1	
						A.
	GAS WELL		1-11 0 1 11 00	<u></u>	Gravity of Condensate	
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MM	CF	Gravity or condensate	
					<u> </u>	
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Sh	rt-in)	Choke Size	
	- and Manage ( Lance) and Lance					
	VI. CERTIFICATE OF COMPLIANCE		611	CONSERVA	TION COMMISSIO	N
VI.			l OIL	CONSERVA		• •
			ン		19	
	I hereby certify that the rules and	regulations of the Oil Conservation	APPROVED			. •
	a tartar base complied	with and that the information gives	3 11			
	above is true and complete to th	e best of my knowledge and belief	.   01	-	- *	<u>.</u>
			TITLE			<u>i</u>
	_					E 1104
	$\sim$ 0 11 $\theta$		This form is	to be filed in	compliance with RUL	_ 1109.
	John Much	a	_ If this is a re	quest for allow	vable for a newly drill	ed or deepened of the deviation
	(Sign	nature)	11		nied by a tabulation of the result of the re	11 FILO GO. 100-0-
	7 4 , ,		il tests taken on th	e Merr TIT MCCO		

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.

YURONKA & CHANDLER
Belcher Well #1
Unit 'M'
Sec. 7, T-22-S, R-38-E
Lea County, New Mexico

## Deviation Tests

1/4*
1/2*
1/2*
3/4°
1.
1-1/2
1.
1.
3/4°
3/4 •
3/4 <b>°</b>
1.
1/2*
1/2°
3/4°
1.
1.

John Yuronka

THE STATE OF TEXAS

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COUNTY OF MIDLAND

BEFORE ME, the undersigned authority, on this day personally appeared JOHN YURONKA, whose name is subscribed to the foregoing instrument and acknowledged to me that he executed the same for the purposes and consideration therein expressed.

GIVEN UNDER MY HAND AND SEAL OF OFFICE this the 27th day of November, A.D., 1967.

My commission expires: June 1, 1969 Notary Public in and for Midland

County, Texas

Friday B to the 10 1. Friday of Alve 12 Friday Service Cylores 2-18-18 Average grant Annolds

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