L. or corico		ı	
DISTRIBUTI		ĺ	
ANTA FE			
ILE			
.s.g.s.			
LAND OFFICE			
TRANSPORTER	OIL		
- AND ON ER	GAS		
OPERATOR			
PRORATION OF			

W15

	DISTRIBUTION		NEW MEXICO OIL	L CONSERVATION COM					
	ANTA FE		\bot	REQUES	EQUEST FOR ALLOWABLE AND			Form C-104	
	ILE						Supersed Effective	es Old C-104 and C	
4	.\$.G.\$.		\perp	AUTHORIZATION TO T				. 1-1-03	
	LAND OFFICE			AUTHORIZATION TO T	KANSPORT OIL AND	NATURAL	GAS		
	T.B.A.V.C.B.C.D.T.E.	OIL	1	7					
	TRANSPORTER	GAS	+-						
Ì	OPERATOR			-					
. 1	PRORATION OFF	ICE	+-						
•	Operator	ICE							
	Petro-Lewis	Corpo	rat:	ion					
- 1	401 Fort Wo	rth Ch	ıb !	Building, Fort Torth, Te	~~ 7 3 1 30				
ſ	Reason(s) for filing (Check prop	er bo	x)	Other (Please				
Ì	New Well			Change in Transporter of:	Other (Freus	e explain)			
ı	Recompletion			Oil Dry	Cas				
- 1	Change in Ownership	<u>.</u>		2-11 1 2 17	densate densate				
I	f change of ownersh and address of previo	ip give ne	me			0.00			
				Noca, Talhana & Tha	ms of 1, Itd., Ed	ox 968, P	Monahana, T	exas	
	DESCRIPTION OF Lease Name	WELL A	ND	Well No. Pool Name, Including	Formation				
	****** * * * * * * * * * * * * * * * *					Kind of Leas	=	Lease No.	
-	New Mexico) Wi Sta	te.	<u> 153 Lanclie Nat</u>	tiz	State, Federa	lor Fee Stato	B-934	
	Unit Letter L	;	130	0 Feet From The $rac{V}{}$ OSt $_{ m L}$	ine and 1253			4	
	Line of Section	19	То	wnship 22-5 Range	37-I , NMPM		Lea		
III. N	FSIGNATION OF	TDANCE	lon,	TED OF OUR AND ON				County	
	Name of Authorized Tr	ansporter of	of Oil	TER OF OIL AND NATURAL G	As				
-					Address (Give address t	o which approx	ed copy of this form	is to be sent)	
<u> </u>	Name of Authorized Tr	Charce	1 1 Car	peline Company	30x 1510, Mid	land, Te	xa s		
				or Dry Gas or Dry Gas	Address (Give address to	which approv	ed copy of this form	is to be sent)	
<u> </u>	Skelly Cil C	empan	·			<u> Aexico</u>		,	
	f well produces oil or	liquids,		Unit Sec. Twp. Rge.	Is gas actually connecte	d? Whe	n		
	give location of tanks.			C 20 23- 37-7	Yes	i	10 1 77		
If	this production is c	ommingle	d wit	h that from any other to a	103	 -	12-1-7:		
V. C	OMPLETION DAT	ronningte. FA	a wit	h that from any other lease or pool	, give commingling order	number: EFI	ECTIVE TANTE	ADV W Tare	
	D			Oil Well Gas Well	New Well Workover	SKI	LIV OH COM	ART 31, 1977,	
- 1	Designate Type	of Compi	letio	n = (X)	WOIRDAG!	Deepen INT	O GETTY OIL	HAINY DIMENCE	
T	ate Spudded			Date Compl. Ready to Prod.	T-1-1-D			COMPANY.	
				Tate Compiler leady to Prod.	Total Depth		P.B.T.D.		
E	levations (DF, RKB, I	RT CP		Name of Producing Formation					
	1, 1110, 1	tr, on, er	c. <i>j</i>	Name of Producing Formation	Top Oil/Gas Pay		Tubing Depth		
h	erforations								
'	a fordiforis					Depth Casing Shoe			
\vdash				TUBING, CASING, AN	D CEMENTING RECORD				
<u> </u>	HOLE SIZ	ZE		CASING & TUBING SIZE	DEPTH SET		SACKS C	ENENT	
ļ							JACKS C	EMENI	
_									
					 				
7. TI	EST DATA AND R	FOUTER	, E.V	P AT I OWARY E		L	······································		
01	L WELL	FACESI	FU	ALLOWABLE (Test must be a able for this de	fter recovery of total volume epth or be for full 24 hours)	of load oil an	id must be equal to o	r exceed top allow-	
	ite First New Oil Run	To Tanks		Date of Test	F				
			1		Producing Method (Flow,	pump, gas lift,	etc.)		
L	ength of Test			Tubing Pressure					
-	• • • •			r wented Liespine	Casing Pressure		Choke Size		
Ac	tual Prod. During Tes	it	-+	Oil - Bbls.					
					Water-Bbls.		Ggs - MCF		
 									
~	AC WEST								
_	AS WELL								
A	tual Prod. Test-MCF.	/υ	1	Length of Test	Bbls. Condensate/MMCF		Gravity of Condensa		
<u></u>	**************************************					!			
Te	sting Method (pitot, be	ack pr.)	1	Tubing Pressure (Shut-in)	Casing Pressure (Shut-i	1	Choke Size		
L				•		'	OHORA SIZE	i	
. CF	RTIFICATE OF C	OMPTIA	NIC:	7					
		OMPLIA	u C I	-	OIL CO	NSERVAT	ION COMMISSION)N	
	••		I .						
I hereby certify that the rules and regulations of the Oil Conservation			APPROVED . 19			, 19			
Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief. ORIGINAL SIGNED BY H. S. WINSTON									
			11 · · · · · · · · · · · · · · · · · ·						
		li	This form is to be	filed in con	pliance with sur	E 1104.			
			This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepened						
	_	(Si ₄	rnatw	re)	Well. this form must be	ACCOMPANIA	d by a tabulation .	of the devices.	
	Agent		-		tests taken on the wel	l in accordar	ice with Rule 11	1.	
		(7	Title)		All sections of this form must be filled out completely for allow-				
_	1-1-74			li li	able on new and recom	pleted wells	•	-	
			Date)		Fill out only Sect	ione I, II, I	II. and VI for cha	nges of owner.	

name or number, or transporter, or other such change of condition.