1.	SANTA FE FILE U.S.G.S. LAND OFFICE IRANSPORTER OIL GAS OPERATOR PRORATION OFFICE	REQUEST	ONSERVATION COMPTSION FOR ALLOWABLE AND INSPORT OIL AND NATURAL (Form C-104 Supersedes Old C-106 and C-110 Ellective 1-1-65	
	Operator ME-TEX SUPPLY COM	PANY			
Address P.O. Box 2070, Hobbs, NM 88240					
Reason(s) for filing (Check proper box) New Well Other (Please explain)					
	Recompletion Change in Ownership	Change in Transporter 51: Oli Dry Ga Casinghead Gas Conden	Example of Oper	rator	
	If change of ownership give name MARTINDALE PETROLEUM CORP., P.O.Box 2403, Hobbs, NM 88240				
U.	Lease Name Vell AND LEASE Vell No. Pool Name, Including Formation Kind of Lease I				
	LITTLE V	2 Drinkard	State, Federa		
	Unit Letter M; 330 Feet From The SouthLine and 480 Feet From The West				
		vnahlp 225 Range		ea County	
111.	DESIGNATION OF TRANSPORT	CER OF OIL AND NATURAL GA			
	Name of Authorized Transporter of Oll Navajo Refining C	XXX or Condensate	Adress (Give address to which appro		
	Name of Authorized Transporter of Cas	inghead Gaey or Dry Gae	Box 159, Artesia. Address (Give address to which appro	NM 88210 ved copy of this form is to be senij	
	Texaco Producing	Inc. Unit Sec. Twp. Pige.	Box 3000, Tulsa, O		
	give location of tanks.	N 7 22S 37E	Yes	1/26/79	
IV.	If this production is commingled wit COMPLETION DATA	h that from any other lease or pool,	give commingling order number		
	Designate Type of Completio	on - (X)	New Well Workover Deepen	Plug Back Same Restv. Dill. Restv.	
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Cil/Gas Pay	Tubing Depth	
	Perforations	<u></u>	1	Depth Casing Shoe	
		TIDING CATING AND			
	MOLE SIZE	CASING & TUBING SIZE	D CEMENTING RECORD	SACKS CEMENT	
v .	. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or enceed top alk				
OII. WEI.I. able for this depth or be for full 24 houre) Date First New Oil Run To Tanks Date of Test Producing Method (Flow, pump, gas III), etc.)			/i, ela.)		
	Length of Test	Tubing Pressure	Casing Pressure		
	Actual Prod. During Test	Oil - Bbls.	Water - Bble.	Gas - MCF	
	GAS WELL				
	Actual Prod. Test-MCF/D	Length of Test	Bble. Condensate/MMCF	Grevity of Condensate	
	Testing Method (puol, back pr.)	Tubing Pressure (Shat-in)	Casing Pressure (Shut-is)	Choke Sise	
VI.			OIL CONSERVATION COMMISSION FEB 0 8 1989		
	I hereby certify that the rules and regulations of the Oil Conservation Commission have been completed with and that the information given above is true and complete to the best of my knowledge and belief.		APPROVED		
	_ MANALL	(Signature)		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	
	Vice-President		tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for allow-		
	(Tule) 2/1/89		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.		
	(Date)		JI -	the first for each change of condition.	

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