	NO. DF COPIES ACCEIVED DISTHIBUTION SANTA FE FILE U.S.G.S. LAND OFFICE IRANSPORTER OIL GAS OPERATOR	REQUE:	L CONSERVATION COMMISSIC.4 ST FOR ALLOWABLE AND RANSPORT OIL AND NATURAL	Form C -104 Supersedes Old C+104 and C+1 Effective 1-1-65 GAS
	Operator Natomas North America, Inc.			
	Address			
	Reason(s) for filing (Check proper to New We!1 Recompletion Change in Ownership	Change in Transporter of: Cil Dry	Other (Please explain) This is a supple Gas X C-104 filed 8/6/ densate Connection	ment to original 79 to reflect a split-
	If change of ownership give name and address of previous owner			
11	I. DESCRIPTION OF WELL AN	DLEASE		
	Lease Name State "23" Com Location	Vell No. Pool Name, Including 1 Antelope Rid	AL A	Lease No. LorFee State LG-1208
	Unit Letter <u>N</u> ;;	660 Feet From The South L	ine and <u>1980</u> Feet From 5	Che West
		rownship 23S Range	34F. , NMPM, Lea	County
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS				
	The Crude Company		Address (Give address to which approved copy of this form is to be sent) 405 Entex Bldg., Houston, TX 77002	
	None of Authorized Transporter of C EI Paso Natural Gal C Gas Company of New Me	Casinghead Gas 📄 or Dry Gas 🛣 O •	Box 1492, El Paso	ed copy of this form is to be sent)
	-Gas Company of New Me: If well produces oil or liquids, give location of tarks.		Is gas actually connected? Whe	a <u>l Bldg., Dallas, TX7527</u> (ⁿ
		N 23 23S 34E	NOAu	<u>igust 10, 1979</u>
IV	Com LETION DATA	Oil Well Gas Well	New Well Workover Deepen	A Plug Back Same Res'v. Diff. Res'v.
	Designate Type of Complet	Date Compl. Ready to Prod.		
			Total Depth	P.B.T.D.
	Elevations (DF, RKB, RT, GR, etc.,	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
	Perforations			Depth Casing Shoe
	TUBING, CASING, AN		D CEMENTING RECORD	
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
V.	TEST DATA AND REQUEST F OIL WELL	OR ALLOWABLE (Test must be a	ifter recovery of total volume of load oil ar	id must be equal to or exceed top allow.
	Date First New Cil Run To Tanks Date of Test		epth or be for full 24 hours) Producing Method (Flow, pump, gas lift, etc.)	
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size
	Actual Pred. During Test			
		Cil-Bbls.	Water-Bbls.	Gas - MCF
	AS WELL			
ſ	Actual Frod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
ŀ	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
VI. (CERTIFICATE OF COMPLIAN	CE	OIL CONSERVAT	
,	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.		APPROVED AUGZU 1979 . 19 Orig. Signed by BY Jerry Sexton TITLE Dist 1, Sup	
-				
	Herry W. Z		This form is to be filed in compliance with RULE 1104.	
-	Terry W. Davis (Signature)		If this is a request for allowable for a newly drilled or deepened	
	August 8, 1979		weil, 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.	
-	(Dut	(e)	Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transported or other such change of condition Separate Forms C-104 must be filed for each pool in multiply completed wells.	

REDERLO AUG 1 3 1979 O.C.D. HOBBS, OFFICE

.