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DISTRIBUTION			Form C -104
FILE	REQUEST FOR ALLOWABLE Superardes () AND		Superaedea Old C-104 and C-110 Elloctive 1-1-65
U.S.G.S.	AUTHORIZATION TO TRA	ANSPORT OIL AND NATURAL G	AS
IRANSPORTER DIL GAS] .		
OPETATOR	4	. •	
Operature	<u></u>	,	
Natomas North America, Inc.			
1 West Third Street, Suite 900, Tulsa, Oklahoma 74103 Reason(s) for filing (Check proper box)			
New Well	Change in Transporter of:	Other (Please explain)	
Recompletion Change in Ownership	Cil Dry Go Cosinghead Gas Conder	nsole X Effective 10/0	11/02
If change of ownership give name			
and address of previous owner DESCRIPTION OF WELL AND	LEASE		
Lesse Name	Vell No. Pool Name, Including F		
State "23" Location	2 Antelope Ridge	- Atoka	State LG-1208
Unit Letter F : 1980 Feet From The North Line and 1980 Feet From The West			
Line of Section 23 Township 235 Ronge 34E , NMPM, Lea County			
Nome of Authorized Transporter of Oil	TER OF OIL AND NATURAL GA	IS Address (Give address to which approv	ed copy of this form is to be sent)
UPG, Inc. None of Authorized Transporter of Car	singhead Gas C or Dry Gas X	P. O. Box 2248, Andrews, Address (Give address to which approv	Texas 79714
Southern Union Gathering Company lst International Building, Dallas, TX 75270			1
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Pge. F 23 23S 34E	Is gas actually connected? Whe Yes	
-	th that from any other lease or pool,	give commingling order number:	
Designate Type of Completic	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Resty, Diff. Restv.
Designate Type of Comprete Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Elevations (DF, RKB, RT, GR, esc.)	Name of Producing Formation	Top Oll/Gas Pay	Tubing Depth
Perforations Depth Casing Shoe			
HOLESIZE	TUBING, CASING, AND CASING & TUBING SIZE	CEMENTING RECORD	
HOLE SIZE			
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TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allow- able for this depth or be for full 24 hours)			
Date First New Oll Run To Tanks	Date of Test	Producing Method (Flow, pump, gas life	. etc.j
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Pred, During Test	Oil-Bbls.	Water-Bbls.	Gas + MCF
GAS WELL Actual Prod. Test-MCF/D	Longth of Test	Bbls, Condensate/AMCF	Gravity of Condensate
Teasing kielhod (pitot, back pr.)	Tubing Freeswe (Ehnt-in)	Casing Freesure (Shut-in)	Choke Size
CERTIFICATE OF COMPLIANC	CE		TION COMMISSION
I hereby certify that the rules and regulations of the Oil Conservation		APPROVED OCT 4 1983	
Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		BYORIGINAL SIGNED BY EDDIE SEAY	
$A \qquad A \qquad$		TITLE OIL & GAS INSPECTOR	
(rain (A	man	This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or despens-	
Craig Conrad / (Signa		If this is a request for anowable for a newly drinte of draptime well, this form must be accompanied by a tabulation of the deviation tasts taken on the well in accordance with RULE 111.	
Operations Administrato		All sections of this form must be filled out completely for sllow- able on new and recompleted wells.	
September 29, 1983		Fill out only Sections 1, 11, 111, and VI for changes of owner well name or number, or transporter, or other such change of condition	
(Date) (Date) well prime or number, or transporting of other book change of other book of the filed for each prol in multiple			