ŀ	DISTRIBUTION SANTA FE	NEW MEXICO OIL CO				
ļ	U.S.G.S.	REQUEST F				
F	LAND OFFICE	AUTHORIZATION TO TRAIN				
	TRANSPORTER GAS					
۱. إ	PRORATION OFFICE Operator					
-	Lewis B. Burleson, Inc.					
	Box 2479, Midland, Texas 79702					
	Reason(s) for filing (Check proper box, New Well	Change in Transporter of:				
	Recompletion	Oil Dry Gas				
L	Change in Ownership X	Casinghead Gas Condense				
8	and address of previous owner	Joseph I. O'Neill, Jr., E				
ا . ا ا	DESCRIPTION OF WELL AND Lease Name	Well No. Pool Name, Including Form				
-	Rocket	l Jalmat				
		Feet From The West Line				
	Line of Section 10 Tow	mship 24-S Range 36				
[. ]	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GAS  or Condensate				
	Name of Authorized Transporter of Oil Shell Oil Co.	or Condensate				
1	Name of Authorized Transporter of Cas El Paso Natural (					
-	If well produces oil or liquids,	Unit   Sec.   Twp.   P.ge.   1				
L	give location of tanks.  f this production is commingled wit	h that from any other lease or pool, gi				
٠.٠ ا	COMPLETION DATA	Oil Well Gas Well 1				
-	Designate Type of Completio	n - (A)				
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation				
	Perforations					
-	HOLE SIZE	TUBING, CASING, AND C				
-						
-						
L . :	TEST DATA AND REQUEST FO	DR ALLOWABLE (Test must be afte				
-	OIL, WELL Date First New Oil Run To Tanks	able for this dept				
+	Length of Test	Tubing Pressure				
-	Actual Prod. During Test	Oil-Bbls.				
	GAS WELL Actual Prod. Test-MCF/D	Length of Test				
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)				
$\vdash$	1 de trid identica i breat anne ber					

(Signature)

(Title)

5-7-79 (Date)

President

## ISERVATION COMMISSION OR ALLOWAB AND

SPORT OIL AND NATURAL GAS

Form C-104	
Supersedes Old C-104	and
Effective 1.1 cc	

	LAND OFFICE						
	TRANSPORTER OIL						
	OPERATOR GAS	-					
1.	PRORATION OFFICE						
••	Operator D. D. J.	Too					
	Lewis B. Burleson	i, inc.					
	Box 2479, Midland	i, Texas 79702					
	Reason(s) for filing (Check proper box)	,	Other (Please explain)				
	New Well	Change in Transporter of:					
	Recompletion Change in Ownership X	Oil Dry Ga Casinghead Gas Conder	F-1				
	If change of ownership give name and address of previous owner	Joseph I. O'Neill, Jr.,	Box 2840, Midland, Tex	as 79702			
**	DESCRIPTION OF WELL AND	LEASE					
11.	Lease Name	Well No. Pool Name, Including F	ormation Kind of Leas	e Lease 1			
	Rocket	l Jalmat	State, Feder	il or Fee fee			
	Location N 1980	) west	as and 660 Feet From	<sub>The</sub> south			
	Unit Letter N ; 1980	Feet From The West Lin	ne and 600 Feet From	The			
	Line of Section 10 Tow	vnship 24–S Range 3	6-E , <sub>NMPM</sub> , Le	<b>a</b> Coun			
	PERSONALIZADA OF MINANCINANA	CED OF OIL AND NATURAL CA	ıe				
11.	Name of Authorized Transporter of Oil	rer of oil and natural ga	Address (Give address to which appro	ved copy of this form is to be sent)			
	Shell Oil Co.		Midland, Texas				
	Name of Authorized Transporter of Cas		Address (Give address to which appropriate Box 1492, El Paso, Tex				
	El Paso Natural (	Unit Sec. Twp. Fige.	· · · · · · · · · · · · · · · · · · ·	en			
	If well produces oil or liquids, give location of tanks.	N 10 24 36	no				
	If this production is commingled wit	h that from any other lease or pool,	give commingling order number:				
	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back   Same Resty. Diff, Re			
	Designate Type of Completion			1 1			
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.			
	Florettes (DE BVB BT CB	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth			
	Elevations (DF, RKB, RT, GR, etc.)	Name of Floadering Connection	100 011) 011 1 1	. abing Dopin			
i	Perforations	<u> </u>		Depth Casing Shoe			
	TUBING, CASING, AND CEMENTING RECORD						
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT			
	NOCE SIZE						
<b>W</b>	TEST DATA AND REQUEST FO	OR ALLOWARIE. (Test must be a:	fter recovery of total volume of load oil	and must be equal to or exceed top a			
٧.	OIL WELL	able for this de	pth or be for full 24 hours)   Producing Method (Flow, pump, gas li				
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas in	jt, etc.)			
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size			
	Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	Gas - MCF			
1		L					
	GAS WELL						
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate			
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size			
	resting Method (pitot, back pre)	Competer					
\ VI.	CERTIFICATE OF COMPLIANO	CE		ATION COMMISSION			
	•		MAY	1 0 1979			
	I hereby certify that the rules and r Commission have been complied w	egulations of the Oil Conservation it and that the information given	AFFROVED				
	above is true and complete to the	best of my knowledge and belief.	BY Orig. B.g  Jerry Sextor				
	-	Tank a Tank Carlot					

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepe well, this form must be accompanied by a tabulation of the devia team taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for all able on new and recompleted wells.

Fill out only Sections I, II. III, and VI for changes of ownwell name or number, or transporter, or other such change of condit

## RECEIVED

MAY - 8 1979
OIL CONSERVATION COMM.
HORES, N. M.