NEW MEXICO OIL CONSERVATION COMMISSION ANTA FE Form C-104 REQUEST FOR ALLOWABLE Supersedes Old C-104 and C-Effective 1-1-65 ILE AND .s.g.s. AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS AND OFFICE OIL TRANSPORTER GAS OPERATOR PROPATION OFFICE Texas Pacific Oil Company, Inc. P. O. Box 4067, Midland, Reason(s) for filing (Check proper box) Texas 79701 Other (Please explain) New Well Change in Transporter of: Recompletion Oil Dry Gas Change in Ownership Casinghead Gas Condensate X If change of ownership give name and address of previous owner ____ II. DESCRIPTION OF WELL AND LEASE Well No. Pool Name, Including Formation Kind of Lease Fee Lease No. Cooper State, Federal or Fee Jalmat Gas Federal US-355 1980 Feet From The North Line and Unit Letter H 660 East Feet From The Line of Section 14 Township 24-S Range 36-E , NMPM, Lea County HI. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil or Condensate T Aidress (Give address to which approved copy of this form is to be sent) ne Permian Corporation of Authorized Transporter of Casinghead Gas The P. O. Box 1183, Houston, Tx. 77001 Address (Give address to which approved copy of this form is to be sent) or Dry Gas El Paso Natural Gas Company Jal, New Mexico 88252 If well produces oil or give location of tanks. Two. Bos. oil or liquids, 24-S 36-E If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Gas Well Oil Well New Well Workover Plug Back Same Res'v. Diff. Res'v. Designate Type of Completion - (X) Date Spudded 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, AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE DEPTH SET 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 exceed top allowable for this depth-or by for full 24 hours) OIL WELL Producing Method (Flow, pump, gas lift, etc.) Date First New Oil Run To Tanks Date of Test Length of Test Tubing Pressure Casing Pressure Choke Size Actual Prod. During Test Oil-Bhia. Water - Bbls. Ggs - MCF 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 VI. CERTIFICATE OF COMPLIANCE OIL CONSERVATION COMMISSION

(Signature)

(Title)

(Date)

W 9 Mc Chutas

Aréa Superintendent

July 15, 1976

hereby certify that the rules and regulations of the Oil Conservation ommission have been complied with and that the information given some is true and complete to the best of my knowledge and belief.	APPROVED			
	BY			
	in the state of th			

TITLE .

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

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 tests taken on the well in accordance with RULE 111.

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

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

Separate Forms C-104 must be filed for each pool in multiply

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If well produces oil or condensate		ensate	Unit Lette	er	Section 14	Township 24-S	Range 24_R
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Date		W.		Add	ress	x 1069, Hobbs,	