DISTRIBUTION			
SANTA FO			
FILE			
U.S.G.S.		1	
LAND OFFICE		1	<u> </u>
TRANSPORTER	OIL		
	GAS		
OPERATOR		1	
PRORATION OFFICE			

## MEW MEXICO OIL CONSERVATION COMMISSIO

Form C-104 10

FILE	REQUE	SI FOR ALLOWABLE	Supersedes Old C-104 and C-1	
U.S.G.S.	ALITUODIZATION TO T	AND  Effective 1-1-65  AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS		
LAND OFFICE	AUTHORIZATION TO	RANSPORT OIL AND NATUR	AL GAS	
TRANSPORTER OIL				
GAS				
OPERATOR				
PRORATION OFFICE				
Operator				
Address John Yuronka				
100.00.00.00.00	T 49 44			
Reason(s) for filing (Check prope	Building, Midland, Texas	79701 Other (Please explain	TO THE TOTAL THE TAXABLE PROPERTY.	
New Well	Change in Transporter of:	Other (Please explain, CASINGHEA	GAS MUST NOT BE	
Recompletion	Oil Dry	Gas DEAPED AND	3/67/15	
Change in Ownership	Casinghead Gas Cor	ndensate	RYCRÍTEN TO R-4070	
If change of ownership give na	mo	18 vil. saint	15,	
and address of previous owner				
DESCRIPTION OF THE * .	N			
Lease Name	Well No.   Pool Name, Including	Formation Kind of		
			Lease No.	
Location Crump	2 Langlie Ma	ttix Side, F	ederat or Fee Pee	
limit i etter				
Unit Letter;	1650 Feet From The South	Line andFeet F	rom The East	
Line of Section	Township 21_G Range	O NMPM,		
	2475	70-2	Lea County	
DESIGNATION OF TRANSF	ORTER OF OIL AND NATURAL			
Name of Authorized Transporter of	f Cil or Condensate	Address (Give address to which a	pproved copy of this form is to be sent)	
Sauteek 211 Goopen		1216 Vengba Bldg	Widland Marra Monos	
Numer of Author! zear Transposies of	Casinghead Gas or Dry Gas	Address (Develous strains)	production of this on is 70% (ent)	
El Paso Natural Gas	Company	600 Bldg of the go	uthwest, Midland, Texas	
If well produces oil or liquids, give location of tanks.	Sec. Twp. Rge.	Is day acted to comfect ad	Williast, with Tarit, Taxas	
	I 1 245 36E		1	
If this production is commingle	d with that from any other lease or poo	l, give commingling order number:		
COMPLETION DATA	Oil Well Gas Well	New Well Workover Deeper	Plug Book   Sar D	
Designate Type of Comp.		- Deeper	Plug Back Same Res'v. Diff. Res'v.	
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
Elevations (DF, RKB, RT, GR, et	Name of Froducing Formation	Top Oil/Gas Pay	Tubing Depth	
	!			
Perforations DF	Mivers & Queen	3454	Depth Casing Shoe	
34541 - 30	(301		37301	
3434 - 30	TUBING, CASING, A	ND CEMENTING RECORD		
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
11*	8-5/8*	3971	300	
7-7/8H	4-1/2#	37301	285	
		35611		
TEST DATA AND REQUEST	FOR ALLOWABLE (Test must be	after recovery of total volume of load depth or be for full 24 hours)	oil and must be equal to or exceed top allow-	
OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, ga	s lift, etc.)	
			,-, =+-,,	
Length of 184-73	Tubing Pressure	Casing Pressure	Choke Size	
Actual Prod. buring TA	ОП-ВЫВ. 90/	Water-Bbls. Packer	Gds-MCF 20/64*	
159 Bbls.	90	69	***	
1,77 101.84	7		101	
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	
		<u> </u>		
CERTIFICATE OF COMPLIA	ANCE	OIL CONSER	VATION COMMISSION	
			in the first of the second	
hereby certify that the rules as	nd regulations of the Oil Conservation	APPROYED A	, 19	
Commission have been complie			Kuman	
lbove is this and complete to	d with and that the information given			
above is true and complete to	d with and that the information given the best of my knowledge and belief.	BY Jam W.		
above is true and complete to	d with and that the information given the best of my knowledge and belief.			
shove is true and complete to	d with and that the information given the best of my knowledge and belief.	TITLE		
Complete to	d with and that the information given the best of my knowledge and belief.	TITLE	in compliance with RULE 1104.	
Above is true and complete to	the best of my knowledge and belief.	This form is to be filed:  If this is a request for all well, this form must be accom-	in compliance with RULE 1104.  lowable for a newly drilled or deepened nonied by a tabulation of the deviation	
above is true and complete to	d with and that the information given the best of my knowledge and belief.	TITLE  This form is to be filed:  If this is a request for al well, this form must be accommost tests taken on the well in accommost.	in compliance with RULE 1104. lowable for a newly drilled or deepened spanied by a tabulation of the deviation cordance with RULE 111.	
Authoriz	the best of my knowledge and belief.  The best of my knowledge and belief.  The best of my knowledge and belief.	TITLE  This form is to be filed:  If this is a request for al well, this form must be accomtests taken on the well in accomtests taken of this form	in compliance with RULE 1104. lowable for a newly drilled or deepened spanied by a tabulation of the deviation cordance with RULE 111. must be filled out completely for allow-	
Authoriz	the best of my knowledge and belief.  Supprise (1)  Thickgant	TITLE  This form is to be filed  If this is a request for al well, this form must be accontests taken on the well in ac  All sections of this form able on new and recompleted	in compliance with RULE 1104. lowable for a newly drilled or deepened spanied by a tabulation of the deviation cordance with RULE 111. must be filled out completely for allow-	

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.

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