1.	DESTRIBUTION SANTA FE FILE U.S.G.S. LAND OFFICE THANSPORTER GAS OPERATOR PRORATION OFFICE		COUSERVATION COMM FOR ALLOWABLE AND ANSPORT OIL AND		Phus C-104 Superseder Ob Elloctive 4-1-6	
••	Doyle Hartman					
	Address					
	312 C & K Petroleum Bldg. Midland, Texas 79701 Reason(s) for filing (Check proper box) Other (Please explain)					
	New Well X Change in Transporter of Request for a testing allowable of 2000 BBLS for April, 1977. Change in Ownership Caminghead Gam Condensate					
	If change of ownership give name					
	and address of previous owner					
11.	DESCRIPTION OF WELL AND I	Well No. Pool Name, Including F	crmation	Kind of Lease		Leane No
	State UTP	1 Rhodes (Yate	es)	State, Federal or F	· State	B-7606
	Unit Letter G 1650 Feet From The North Line and 1650 Feet From The East					
	28	mship 26-S Range	37-E , NMPM	, Lea		County
	Elite of oscillar					-
H.	DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil [X] or Condensate Address (Give address to which approved copy of this form is to be sent)					
	Permian Corporation Box 1183, Houston, Texas 77001 Name of Authorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent)					
	Name of Authorized Transporter of Cas	inghedd Gas [] of Diy Gas []	Address (Marcas	to tonte it in proved es	,	
	If well produces oil or liquids,	Unit Sec. Twp. Pgc.	Is gas actually connect	ed? When		
	give location of tanks. If this production is commingled with	4 20 20 37	No No	r number:	6/1/77	·-·
	COMPLETION DATA	Oil Well Gas Well	New Well Workover		g Back Same Res	v. Dif. Res
	Designate Type of Completio	$n - (X)$ χ	X			
•	Date Spudded	Date Compl. Ready to Prod.	Total Depth 3371	P.B	з.т.р. 3340	
	4/4/77 Elevations (DF, RKB, RT, GR, etc.)	4/19/77 Name of Producing Formation	Top O!I/Gas Pay	Tut	ing Depth	
	2967 G.L.	Yates	3152	Deg	3072 oth Casing Shoo	
	Perforations .					
		TUBING, CASING, AND	D CEMENTING RECOR		SACKS CEM	ENT
	HOLE SIZE	8 5/8, 28 #	605		275	
	7 7/8	4 1/2, 10.5#	3371		950	
	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 be for full 24 hours)					
	Date First New Oil Run To Tanks	Date of Test	Producing Mothed (Flou		.)	
	Lungth of Tool	Tubing Pressure	Cosing Pressure	Cho	Choke Size	
			Water - Bbls.	Gue	1-MCF	
	Actual Pred. During Tost	O11-8bla.	Willet - Beta.			
1						
į	GAS WELL, Actual Frod. Tobl-MCF/D	Length of Tost	Bbls. Condensets/AMC	F Gre	vity of Condensate	
	Teating kiethed (picot, back pr.)	Tubing Prossure (Shut-in)	Cosing Pressure (Ehut	-in) Cho	oke Size	<u></u>
,,,	ODUMENOAME OF COURT IANG	TOWN THE OF COMPANY AND THE OF				 Į
	CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION APPROVED 19 19			
	I hereby cartify that the rules and regulations of the Oil Conservation Commission have been compiled with and that the information given		APPROVED Signed by			
•	phove in true and complete to the	beat of my knowledge and belief.	BY	James Buxton		
	1		TITLE	Supv.	1	.104
	1)		II	the filed to compl	TANCO WITH RULE	1104.

Operator-Part Owner (l'ide) 4/21/77

(Signature)

(Data)

If this is a request for allowable for a newly delited or despend well, this form must be accompanied by a tribulation of the districtions taken on the well in accordance with four 111.

All sections of this form must be filled out completely for ellerable on new and recompleted walls. FIII out only fractions I. II, III, and VI for changes, of usua vill name or number, or transporter, or other such thanks of conditions.

RECEIVED

OIL COMMOBBS, N. M.