NO. OF COPIES REC		ļ	·
DISTRIBUTION			
SANTA FE			
FILE			
U.S.G.S.		Γ	
LAND OFFICE			
TRANSPORTER	OIL		
THAILST ON ER	GAS		
OPERATOR			Γ

NO. OF COPIES REC	EIVED				
DISTRIBUTION			NEW MEXICO OIL CONSERVATION COMMISS REQUEST FOR ALLOWABLE AND		
SANTA FE				Form C-104 Supersedes Old C-104 and C-116 Effective 1-1-65	
FILE					
U.S.G.S.			AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS		
LAND OFFICE			THE THE TOTAL CASE AND THE GAS A		
TRANSPORTER	OIL				
	GAS				

	LAND OFFICE TRANSPORTER OIL GAS OPERATOR	AUTHORIZATION TO TI	RANSPORT OIL AND	NATURAL (3 A3						
ı.	PRORATION OFFICE	<u> </u>									
	Operator IINTON TE	EXAS PETROLEUM CORPORAT	TON								
	Address	ess									
		1300 Wilco Building, Midland, Texas 79701									
	Reason(s) for filing (Check proper box New Well	Change in Transporter of:	Other (Plea		. 1 A	-					
	Recompletion	Oil Dry	Gas 🔲		ul train	fall .					
	Change in Ownership	Casinghead Gas Cond	lensate								
	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 Leas	e	Lease No.					
	Langlie-Jal Unit	16 Langlie-Matt		State, Federa		Lease No.					
	Unit Letter K; 1980	O Feet From The South L	ine and1842	Feet From	The West						
Į	Line of Section 31 Tov	wnship 24-S Range	37-Е , ммр	м, Lea		County					
11.	DESIGNATION OF TRANSPORT Name of Authorized Transporter of Oll Shell Pipeline Corp Texas-New Mexico Pi	or Condensate	As Address (Give address to which approved copy of this form is to be sent) Box 1910, Midland, Texas 79701 Box 1510, Midland, Texas 79701								
	'Name of Authorized Transporter of Cas El Paso Natural Gas	singhead Gas 🔀 💮 or Dry Gas 🦳	Address (Give address Box 1492, El			s to be sent)					
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. G 5 25-S 37-1	Is gas actually connec								
	If this production is commingled wit			er number:							
]	COMPLETION DATA Designate Type of Completion	Otl Well Gas Well	New Well Workover	Deepen	Plug Back Same F						
	Date Spudded	Date Compl. Ready to Prod.	Total Depth		P.B.T.D.	X ;					
	4-29-48	8-1-74	3497		3485 '						
	Elevations (DF, RKB, RT, GR, etc.)	1	Top Oil/Gas Pay		Tubing Depth						
-	Perforations with 1 JSPF 33	Seven-Rivers (Queen) 38-48', 3347-50', 3352-	3338' 58', 3360-72',	3378-83',	3446' Depth Casing Shoe						
}	3389-92'.	3389-92'. TUBING, CASING, AND CEMENTING RECORD									
ľ	HOLE SIZE	CASING & TUBING SIZE	DEPTH S		SACKS C	EMENT					
	14"	9 5/8"	1100'		300 Sx.						
-	8 1/4"	/" 4 1/2" (Liner)	3400 ' 3583 '		200 Sx.	· · · · · · · · · · · · · · · · · · ·					
-		2 3/8" (Tubing)	3446'		100 Sx.						
v. '	TEST DATA AND REQUEST FO	OR ALLOWABLE (Test must be	after recovery of total vol		and must be equal to o	r exceed top allow-					
-	OIL WELL Date First New Oil Run To Tanks	II. WELL able for this depth or be for full 24 hours)									
	8-1-74	8-1-74	Pump	w, pamp, gas ssj	, 6.0.7						
+	Length of Test	Tubing Pressure	Casing Pressure		Choke Size						
	24 hrs.	0	0								
-	Actual Prod. During Test	Oil-Bbls.	Water - Bbls.		Gas-MCF						
I_			36		I TSTM						
۲	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbis. Condensate/MMC	F	Gravity of Condensa	t •					
-	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut	:-in)	Choke Size						
. L	CERTIFICATE OF COMPLIANC		011	CONSEDIA	TION COMMEN	221					
	hereby certify that the rules and re			AUG	TION COMMISSIN	, 19 <u> </u>					
C	Commission have been complied w bove is true and complete to the	ith and that the information given		Joe D. Ramey TITLE Dist 1. 200							
	••••••••••••••••••••••••••••••••••••••		17								
			This form is to be filed in compliance with RULE 1104.								
_	Stanley H. Jost	aa.1	If this is a req	uest for allowa	able for a newly dri	benequeb to bell					
	Gas Measurement Analys	· · · · •	tests taken on the	well in accord	iance with RULE 1	11.					
-	(Titl		All sections of	All sections of this form must be filled out completely for allowable on new and recompleted wells.							
	August 5, 1974		Fill out only	Sections I. II.	III. and VI for ch	anges of owner,					
	(Dat	e)	'		er, or other such char- be filed for each						
			completed wells.	AVT MURE							