NEW MEXICO OIL COREQUEST S AUTHORIZATION TO TRAM Ompany 114, Midland Texas Change in Transporter of: Oil Dry Gas Casingheaa Gas Conden Previous Operator - F ASE Well No. Pool Name, including For 1 Langlie Matt Feet From The North Line 125 Range
AUTHORIZATION TO TRANS Ompany 114, Midland Texas Change in Transporter of: Oil Dry Sas Casingheau Gas Conden Previous Operator - F ASE Well No. Pool Name, including For the Langlie Matt Feet From The North Lin
Company 114, Midland Texas Change in Transporter of: Oil Dry Gar Casingheda Gas Conden Previous Operator - F ASE Well No. Pool Name, including For 1 Langlie Matt Feet From The North Lin
Change in Transporter of: Oil Dry Gas Casingheau Gas Conden Previous Operator - F Well No. Pool Name, including Fo 1 Langlie Matt Feet From The North Lin
Change in Transporter of: Oil Dry Gas Casingheau Gas Conden Previous Operator - F Well No. Pool Name, including Fo 1 Langlie Matt Feet From The North Lin
Change in Transporter of: Oil Dry Gar Casingheau Gas Conden Previous Operator - F Well No. Pool Name, including For 1 Langlie Matt Feet From The North Line
Change in Transporter of: Oil Dry Gas Casingheda Gas Conden Previous Operator - F ASE Well No. Pool Name, including For 1 Langlie Matt Feet From The North Lin
Oil Dry Gos Casingheau Gas Conden Previous Operator - F ASE Well No. Pool Name, including Fo 1 Langlie Matt Feet From The North Lin
Casingheda Gas Conden Previous Operator - F ASE Well No. Pool Name, including For 1 : Langlie Matt Feet From The North Lin
NSE Well No. Pool Name, including For language Matt Feet From TheNorthLin
Langlie Matt Feet From The North Lin
_ Feet From The North Lin
ip 25 Range
or Condensate
Temporarily Aba
it Sec. Twp. Rge.
Oil Well Gas Well
- (X)
ite Compl. Ready to Prod.
rme of Producing Formation
TUBING, CASING, AN
CASING & TUBING SIZE
ALLOWABLE (Test must be a
able for thin d
ubing Pressure
n-Bols.
ength of Test
using Pressure (Shut-in)

DNSERVATION COMMISSION

Form C-104

SANTA FE	REQUEST F	OR ALLOWABLE	Supersedes Old C-104 and C-110 Effective 1-1-65
FILE		CMA SERVICE OF A S	
U.S.G.S.	AUTHORIZATION TO TRAN	ISPORT OIL AND NATURAL (3/2
TRANSPORTER GAS			
OPERATOR			
PRORATION OFFICE		·····	
Operator	_		
Solar Oil	Company		
	5114, Midland Texas		i e
Reason(s) for filing (Coreck proper box)	Jird, Murada Texas	Other (Please explain)	
New Well	Change in Transporter of:	Change in Opera	ator
Recompletion	O:: Dry Gas	<u></u>	į
Change in Ownership	Casingheda Gas Condens	ate	
If change of ownership give name and address of previous owner	Previous Operator - B	ronco Oil Corporation	
i. description of well and L	EASE		
Lease Name	Well No. Pool Name, Including For		!
C. W. Dabbs	<u>l : Langlie Matti</u>	X State, Feder	Fee
	N a satela	2210	m Nact
Unit Letter C ; 330		and 2310 Feet From	Lea County
Line of Section 35 Town	nship 25 Range (37 , NMEM,	Lea sam,
L DESIGNATION OF TRANSPORT	ER OF OIL AND NATURAL GAS	5	
Name of Authorized Transporter of Oil	or Condensate	Address (Give address to which appro	oved copy of this form is to be sent)
Name or Authorized Transporter of Cas	Temporarily Abar	ndoned Address (Give address to which appro	aved copy of this form is to be sent!
Name or Authorized Transporter of Casi	abenpa:	Address (time day, ess to misch appro	in the second se
	Unit Sec. Twp. Rge.	Is gas actually connected? W	hen
If well produces oil or liquids, I give location of tanks.			
If this production is commingled with	h that from any other lease or pool.	rive commingling order number:	
V. COMPLETION DATA			Flug Back Same Res'v. Diff, Res'v.
Designate Type of Completion	Oil Well Gas Well n = (X)	New Well Workover Deepen	Flug Back Same Resiv. Ditt. Resiv.
	Date Compl. Ready to Prod.	Total Depth	P.S.T.D.
Date Spudaed	Jane Jonepa III		
Elevations (DF, RKB, RT, GR, etc.,	Name of Producing Formation	Top Cil/Gas Pay	Tubing Depth
Perforations			Depth Casing Shoe
	TITLING GARAGE CAR	CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
FOLE SIZE	0.0011.0 0.10011.0 0.110		
		<u>i</u>	
v. test data and request fo	OR ALLOWABLE (Test must be a)	fter recovery of total volume of load of pth or be for full 24 hours)	il and must be equal to or exceed top allow-
ON. WELL Date First New Cil Run To Tanks	Date of Test	Producing Methos (Flow, pump, gas	iifi, etc.)
pale . Hat her out that it is a second		1	
Length of Teat	Tubing Pressure	Casing Problems	Choke Size
			2 1/27
Actual Prod. During Test	C() - 3512.	Water-Balu.	Gas-MCF
·		<u> </u>	
0.40 H TT "			
GAS WELL Actual Prod. Test-MCF/D	Length of Teat	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-12)	Casing Pressure (Uhut-im)	Choke Size
vi. Centificate of complian	CE	OIL CONSERV	ATION COMMISSION
		APPROVED	
I hereby certify that the rules and to	regulations of the Oil Conservation with and that the information given		
above is true and complete to the	e best of my knowledge and belief.	BY JUY	1 miles
		7×L=	//
		mus de	n compliance with RULE 1104.
Di Carriera		Transition assumet for off	lowable for a newly drilled or despense
Sien (Sien		The amount of the second that the concern	minial by a labulation of the covietion
Vine Pros	i ta i urri J	WCII, IIII	nording with DIII # 111
	aire) cidant	tests taken on the well in ac-	cordance with RULE 111.
	Nig.	tests taken on the well in accommendation and this form able on new and recompleted	cordance with RULE 111. must be filled out completely for allow wells.
re 1 May 190	ident Mey D8	All uncident of this form able on new and recompleted	must be filled out completely for allow wells.
re 1 May 190	Nig.	tests taken on the well in co- All succions of this form able on new and recompleted Fill est only Sections I, well name or number, or transp	cordance with RULE 111. must be filled out completely for allow wells.

: DISTRIBUTIO : .				
		UTL CORUM TO THE CONTRIBUTION	Form C-104	
FILE	REQ	UEST FOR ALLIA WASLE	Supersedes Old Effective 1-1-65	
U.S.G.S.	 -	edites askeren en teaas akat a		
LAND OFFICE	LE LI AUTHORIZATION T	NAUTAN GAAL DIE TRAKSPORT O TRAKSPORT OIL AND MATUR	¢Γ, Ĥ¥2	
TRANSPORTER CIL		Spinits 1		
S A 3	i			
PROBATION OFFICE	·			
Specarior				
,	L CORPORATION			
- Address: 2101 W. Te	exas, Box 5114, Midland	d, Texas		
Reason's for filing (Clack proper		Ciner P. iasi explain)		
Hew den.	Change in Transporter of:	: 		
Theodomy lesson.		Cry 325 =		
Tampe in Owneronip X	Casingkeas Gas L.,	Condensate :		
If change of ownership give nam				
and address of previous owner_				
DESCRIPTION OF WELL AN	ND LEASE	os de la complexación de la comp		
Lease Name	Lease No. Well No. 1		Kind of Lease State, Federal or Fee	P
G. W. Dabbs	<u></u>	Langlie Mattix (Queen)		Fee
: Unit Letter C ; 3	330 Feet From The North	2 Line in 2,970 Feet F	rom The East	
·				
Line of Cestion 35	Township 25-S man	<u>ee 37-3 , meete I</u>	_ea	County
AFSIGNATION OF TRANSPI	ORTER OF OIL AND NATUR	23 P#S		
Minne of Authorized Transporter of		Adaress (Disc at tress in which a	pproved copy of this form is to	be sent)
Shell Pipeline Co).	Box 1910, Midland		
Timm is Authorized Timnsporter of		TT Nacreso (Give address to which a	approved copy of this form is to	be sentj
El Paso Natural G		Box 1384, Ja1, Νε		
His well produce tool or liquids,	Onit Sec. Twp. F	iye. iy gus datualiy disheritedi	When	-
It well produce onlice liquids, gwellor min of tanks.	Unit Ses. Twp. 5	ije. iz gas zorudiy cimperieda 37-E Yes	When Unknown	
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NO. C. COPIES PUBLICATION				010	2 and C-103	
DISTRIBUTION	NEW MEXICO C	IL CONSERVATION	COMMISSION	Hite	ative 1-1-65	
SANTA FE				5a. Insi	cate Type of Lease	
0.3.6.8.					Fee	
LAND CFFICE				5. State	Oli & Gau Lease No.	
AOTERATOR						\overline{m}
		DES ON WELLS				
CONDRY OF THIS FORM FOR PHOPS	OSALS TO DRILL OR TO DEEPEN FOR PERMIT -" (FORM C-1)	OR PLUG BACK TO A DIF DI) FOR SUCH PROPOSALS	FERENT RESERVOIR.	7, Unit	Agreement Name	7777
01u 75 0A5				ļ	Name of	
Name of Operator	OTHER*			'	n or Lease Name	
Saveray DM 011 00	mpany			g, Well		
1 Address of Coerator				1	_	
P. O. Box 11,16,	Roswell, New Mexi	LCO			eld and Pool, or Wildca	
4. Location of Weil	330 FEET FROM THE	North	2310	FEET FROM	ralie Mattix	~~~
UNIT TELLER						
	n35 томияніі	25 RANG	ie3?	NMPM.		
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		ow whether DF, RT, G	K, etc.)	ية. ق		
	302	1 DF	Navias Papa	er or Other Da	ita	
16. Check A	Appropriate Box To In	ndicate Nature of	Notice, Kepo	EQUENT REP	ORT OF:	
NOTICE OF IN	ITENTION TO:		0000			_
	PLUG AND A	SANDON REMEDIA	WORK		ALTERING CASING	_
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TEMPORAR LY ABANDON	CHANGE PLA	NS CASING T	EST AND CEMENT JO	• [emi_Annual_'	r' Penort	
PULL OR ALTER CASING		OTHER	·	Zii.1-Miliilua -	1H 10000 4 4	
OTHEF						
17. Descrine Proposed or Completed Op	perations (Clearly state all;	pertinent details, and g	ive pertinent dates	, including estima	ted date of starting any	propose
work) SEE RULE 1103.						
			-wr wassibi	lities.		
TA pending possib	de workover or se	econdary recov	ery possion	TICICO.		
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le. Thereby certify that the information	above is true and complete	to the best of my know	ledge and hetief.			
le. I hereby certify that the information					7-13-66	
	above is true and complete		ledge and belief.	er oa	та7-13-66	
,		Produc		er oa	7-13-66	
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,	John Hastings	Produc			τε	

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NO. OF COPIES RECEIVED			•	Form C-103 Supersedes Old
DISTRIBUTION				C-102 and C-103
SANTA FE	NEW MEXICO	OIL CONSERVAT	ION COMMISSION	Effective 1-1-65
FILE		U 1.4 ;	35 /H 3	The state of Lance
U.S.G.S.				Sa. Indicate Type of Lease State Fee X
LAND OFFICE				
OPERATOR				5, State Oil & Gas Lease No.
SUNDS	RY NOTICES AND REF	ORTS ON WELL	S DIFFERENT RESERVOIR.	
OIL SAS WELL WELL	OTHER.			7. Unit Agreement Name
2. Name of Operator				8. Farm or Lease Name
Summay of Cil (Jap any			G. Mabbs
3. Address of Operator P. 9. Box U.L.	Roswell, New Mer	cico		9. Well No.
4. Location of Well				13. Field and Pool, or Wildcat
C	330	North	AND 2310 FEET FR	Langlie Mattix
54 c + 1	10N	25	NM	
THELINE, SECT	ION TOWNSH	IP	ANGENM	
mmmmmm	15. Elevation (S	how whether DF, RT	, GR, etc.)	12. County
		I DE		
			(N	Oal as Dave
	Appropriate Box To	Indicate Nature	of Notice, Report or of Subseque	Other Data ENT REPORT OF:
_			<u></u>	
PERFORM REMEDIAL WORK	PLUG AND	ABANDON REME	DIAL WORK	ALTERING CASING
TEMPORARILY ABANDON		сомм	ENCE DRILLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING	CHANGE PL	ANS CASIN	G TEST AND CEMENT JOB	5 177 A 55 A
		от	HER	mmun: TA Meport
OTHER				
	(611	postinant datails, an	d aine pertinent dates includ	ling estimated date of starting any proposed
work) SEE RULE 1103.	pperditons (Creary state are	percent accept,		
MA mending moneil	ale wastower or s	econdary reco	very possibilitie	
TA pending possion	TA MOLYOAET, OT. P.	scondary reco	AGER DODDERSTRANGE	os.
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	on about in two and complete			es.
18. I hereby certify that the informati	on above is true and complet			es.
		e to the best of my k	nowledge and belief.	
		e to the best of my k	nowledge and belief.	DATE Land
18. I hereby certify that the informati		e to the best of my k	nowledge and belief.	
		e to the best of my k	nowledge and belief.	

CONDITIONS OF APPROVAL, IF ANY: