ENERGY AND M								Form C-1	04
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OIL CONSERVATION DIVISION						Format 06-01-83			
FILE		╉╾┨			. BOX 2088			Page 1	
U.S.B.A.		+1		SANTA FE,		0.0 9750	1		•
LAND OFFICE						10 8730			
TRANSPORTER									
OPERATOR		╊╼╍┫		REQUEST	FOR ALLO	VABLE			
PRORATION OFF	ICE						•		
			AUTHORI	ZATION TO TR	ANSPORT OF	L AND NAT	URAL GAS		
Operator									
Sir	go-Co	llier, I	nc.						
ladress									******
P.O.	Box	3531, M	idland,	Texas, 7	9702				
New Well	and trues	k proper sozj		•		Other (Pleas			
5			Change in 7	Funsporter of:	_	Change	e Of Operator	from P	oint
- Recompletie				E.	Dry Ges	Petrol	eum Corp. to	Sirgo-	Collier
Change In O	wnership		Cesing	head Gas	Condensete	Inc.	/1/87.	01160	ourrer,
change of own id address of p	ership C revious	we name Sin	rgo Bro	thers, Ind	c. P.O.	Box 380	5, Midland,		
							o, muland,	Tx. 797	02
DESCRIPTIO	ON OF 1	VELL AND L	EASE				<u>, nidiand,</u>	<u>Tx.</u> 797	02
DESCRIPTIO	<u>ON OF</u>	VELL AND L arhide	EASE Well No. P	ool Name, Includin	g Formation		Kind of Lease	Tx. 797	02
DESCRIPTIO	<u>ON OF</u>	VELL AND L arhide	EASE	ool Name, Includin	g Formation				
DESCRIPTION DESCRIPTION UEEN Sar	Dologi Do	VELL AND L arhide t	EASE   well No. Pr 26	Dol Name, Includin Dollarhi	reference ion	n	Kind of Lease	State	Lease No.
DESCRIPTION Ween Sar	Dologi Do	VELL AND L arhide t	EASE   well No. Pr 26	ool Name, Includin	reference ion	n	Kind of Lease		Lease No.
DESCRIPTION DESCRIPTION DESCRIPTION Ween Sar OCCISION	DN OF Doline D	VELL AND L arhide t 990	EASE Well No. Pr 26	Dol Name, Includin Dollarhi	reference ion	n	Kind of Lease State, Federal or Fee Feet From The	State	B-9613
DESCRIPTIC COSE Name W. Ueen Sar Occilion Unit Letter Line of Section DESIGNAT	DN OF Dolind Uni D 3	VELL AND L larhide t : 2 TRANSPOR	EASE   Well No.  Pr   26   Feet From 7   p  245	Doi Name, Includin Dollarhj The Range	I Formation ide Quee Line and6 38E	en 50	Kind of Lease State, Federal or Fee Feet From The	State West	Lease No.
DESCRIPTION DESCRIPTION DUCEN Name W. DUCEN Sar Occetion Unit Letter Line of Section DESIGNAT	DN OF Dolind Uni D 3	VEIL AND L larhide t : <u>990</u> 2 Townshi	EASE   well No.  Pr   26   Feet From 7  p 245   TER OF OII	Dol Name, Includin Dollarhj TheNorth Range AND NATUR	Termation ide Quee Line and 60 38E ALGAS	еп 50 . ммрм	Kind of Lease State, Federal or Fee Feet From The	State West Lea	Lease No. B-9613 County
DESCRIPTIC CONTRACT OF CONTRACT Description Unit Letter Line of Section DESIGNAT Some of Authorize Texa	DN OF Doll D D 3 10N OF D Transp as - NM	VEIL AND L larhide t : 990 2 Townshi TRANSPOR Pipline	EASE Well No. Pr 26 Feet From 7 p 24S IER OF OII or Cond Co. (0)	Dollarhi Dollarhi North Range AND NATUR 19356-1828)	Line and Add GAS	50 . NMPM Give address	Kind of Lease State, Federal or Fee Feet From The	State West Lea	Lease No. B=9613 County
DESCRIPTIO DESCRIPTIO DESCRIPTIO Unit Letter Line of Section DESIGNAT Sector Authority Texa	DN OF Doll D D J J J J J D J J J J ON OF Tronsp as-NM	VEIL AND L larhide t : 990 2 Townshi TRANSPOR Pipline	EASE Well No. Pr 26 Feet From 7 p 24S IER OF OII or Cond Co. (0)	Dol Name, Includin Dollarhj TheNorth Range AND NATUR ensate	M Formation ide Quese Line and6 38E Address ( P.O.	211 50 . NMPM Give address 1 Box 252	Kind of Lease State, Federal or Fee Feet From The o which approved copy	State West Lea of this form is 1. 8824	Lease No B-9613 County
DESCRIPTIC Conservation Description Unit Letter Line of Section DESIGNAT Serve of Authorized Texa Inter of Authorized	DN OF Doll dUn: D J J J J J J J J J J J J J J J J J J	VEIL AND L arhide t : 990 2 Townshi TRANSPOR prior of OU D Pipline	EASE Well No. Pr 26 Feet From 7 p 24S IER OF OII or Cond Co. (0) rad Cae 2	Doi Name, Includin Dollarhj Dollarhj North Range AND NATUR ensote [] 055-1828) or Dry Cas []	Address (	211 50 . NMPM Give address 1 Box 252	Kind of Lease State, Federal or Fee Feet From The which approved copy 28, Hobbs, Ni o which approved copy	State West Lea of this form is 1. 8824	Lease No B=9613 County

If this production is commingled with that from any other lease or pool, give commingling order number:

NOTE: Complete Parts IV and V on reverse side if necessary.

## VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.

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	OIL CONSERVAT	ION DIVISION	
APPROV	EDMA	2 1 1987	. 19
8Y	Orig. Signed by Paul Kautz		
	Geologist		

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 completed wells.

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.

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## IV. COMPLETION DATA

<b>Designate</b> Type of Completion			· Gas Well I I	New Well	' Workover I I	f Deepen i i	i I I Bind Bacz	" Same Ples"v. I I	1 1 1
Date Tyuddod	Date Compl. Ready to Prod. Total Depth				P.B.T.D.				
Elevations (DF, RKB, RT, GR, etc.)	ducing For	nation	Top Oll/Gas Pay			Tubing Depth			
Pertensione						Depth Casing Shoe			
		TUBING,	CASING, AN	DCEMENT	ING RECOR	D			
HOLE SIZE CASIN		NG & TUBI	ING SIZE		DEPTH SE	т	S/	CKS CEME	NT
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## V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceedeep attooble for this depth or be for full 24 houre)

Date First New Oil Run To Tanks	Date of Teet	Producing Method (Flow, pump, gas lift, etc.)		
Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
Actual Prod. During Test	Oil-Bhis.	Water - Bbis.	Gas-MCF	
			-	

## GAS WELL

Actual Prod. Test-MCF/D	Langth of Test	Bbls. Condensate/MG4CF	Gravity of Condensate
Tooting Mothod (pilot, back pr.)	Tubing Pressure (Shat-12)	Casing Pressure (Shut-1R)	Choke Size
1			

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HOBES OFFICE

es.

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