<u> </u>						
DISTRIBUTION						
SANTA FE	NEW MEXICO OI			N	Form C-104	
FILE /-	REQUE	ST FOR ALLO	WABLE		Supersedes Ol Effective 1-1-	
U.S.G.S.	ALITHODIZATION TO T	AND				
LAND OFFICE	AUTHORIZATION TO T	RANSPORTO	L AND NAT			
OIL /			_	F	RECEL	VED
TRANSPORTER GAS			ρ			
OPERATOR 7			•		11114	1065
PRORATION OFFICE					ુંમ	1303
Operator	. 042 0-				D. C. (	3.
Cities Service Address	e ull ce.				ARTESIA, OF	FICE
Bex 69 - Hebb	os, New Mexico					
Reason(s) for filing (Check proper	box)		er (Please explo	•		
New Well	Change in Transporter of:			name fro	m State #6	to State
Recompletion	Cil Dry	Gas Bt	J No. 6			
Change in Ownership	Casinghead Gas Cor	ndensate				
State BU		Name, Including F The Hills Gra			d of Lease te, Federal or Fee	State
Unit Letter P ; 4	950 Feet From The north	Line and	90 Fe	et From The	east	
	950 Feet From The <b>north</b>				east	
Line of Section 32 ,	Township 178 Range	<b>30B</b> GAS	, NMPM,	Eddy		County
Line of Section 32  DESIGNATION OF TRANSPO  Name of Authorized Transporter of  Texas—New Mex	Township 17S Range  ORTER OF OIL AND NATURAL Coil  or Condensate  ice Pipeline Co.	GAS Address (Give	, NMPM, address to whi 1510 - Mic	Eddy  ch approved co	ppy of this form is t	o be sent)
Line of Section 32  DESIGNATION OF TRANSPO Name of Authorized Transporter of Texas—New Mex	Township 178 Range  ORTER OF OIL AND NATURAL  Cil  or Condensate	GAS Address (Give	, NMPM, address to whi 1510 - Mic	Eddy  ch approved co	opy of this form is t	o be sent)
DESIGNATION OF TRANSPO Name of Authorized Transporter of Texas—New Mex Name of Authorized Transporter of nome	Township 17S Range  ORTER OF OIL AND NATURAL Coil  or Condensate  ice Pipeline Co.	GAS Address (Give	, NMPM,  address to whice address to whice	Eddy  ch approved co	ppy of this form is t	o be sent)
DESIGNATION OF TRANSPO  Name of Authorized Transporter of  Texas—New Mex  Name of Authorized Transporter of	Range  RTER OF OIL AND NATURAL  Cil  or Condensate   ice Pipeline Co.  Casinghead Gas or Dry Gas   Unit Sec. Twp. Rge.	GAS Address (Give Bex Address (Give	, NMPM,  address to whice address to whice	Eddy  ch approved co  iland, Te  ch approved co	ppy of this form is t	o be sent)
DESIGNATION OF TRANSPO  Name of Authorized Transporter of  Texas—New Mex  Name of Authorized Transporter of  none  If well produces oil or liquids, give location of tanks.	RTER OF OIL AND NATURAL OIL OIL OF Condensate Co.  Casinghead Gas Or Dry Gas	GAS Address (Give Box Address (Give	, NMPM,  e address to white  address to white  y connected?	Rddy  ch approved co  iland, Te  ch approved co  When	ppy of this form is t	o be sent)
DESIGNATION OF TRANSPO Name of Authorized Transporter of Texas—New Mex Name of Authorized Transporter of none If well produces oil or liquids, give location of tanks.  If this production is commingled	Range  RTER OF OIL AND NATURAL  OIL OF Condensate   Ico Pipeline Co.  Casinghead Gas or Dry Gas  Unit Sec. Twp. Rge.  P 32 178 30  with that from any other lease or poor	GAS  Address (Give  Box  Address (Give	, NMPM,  address to white address to white caddress to white y connected?	Rddy  ch approved co  illand, Te  ch approved co  When  eer:	opy of this form is to popy of this form is to	o be sent)
DESIGNATION OF TRANSPO Name of Authorized Transporter of Texas—New Mex Name of Authorized Transporter of none If well produces oil or liquids, give location of tanks.  If this production is commingled	RTER OF OIL AND NATURAL OF CONTROL OF CONTRO	GAS  Address (Give  Box  Address (Give	, NMPM,  address to white address to white caddress to white y connected?	Rddy  ch approved co  iland, Te  ch approved co  When  eer:	opy of this form is to popy of this form is to	o be sent)
DESIGNATION OF TRANSPO Name of Authorized Transporter of Texas New Mex Name of Authorized Transporter of Name If well produces oil or liquids, give location of tanks.  If this production is commingled COMPLETION DATA	PRIMER OF OIL AND NATURAL OF COLUMN OF Condensate Co.  Casinghead Gas or Dry Gas County Count	Address (Give  Address (Give  Is gas actual)  R  New Well	, NMPM,  address to white address to white caddress to white y connected?	Rddy  ch approved co  lland, Te  ch approved co  When  per:	opy of this form is to popy of	o be sent)
DESIGNATION OF TRANSPO  Name of Authorized Transporter of  Texas—New Mex  Mane of Authorized Transporter of  none  If well produces oil or liquids, give location of tanks.  If this production is commingled  COMPLETION DATA  Designate Type of Comple	RTER OF OIL AND NATURAL OF CONTROL OF CONTRO	GAS  Address (Give  Box  Address (Give	, NMPM,  address to white address to white caddress to white y connected?	Rddy  ch approved co  lland, Te  ch approved co  When  per:	opy of this form is to popy of this form is to	o be sent)
DESIGNATION OF TRANSPO  Name of Authorized Transporter of  Texas—New Mex  Name of Authorized Transporter of  none  If well produces oil or liquids, give location of tanks.  If this production is commingled  COMPLETION DATA  Designate Type of Comple	PRIMER OF OIL AND NATURAL OF COLUMN OF Condensate Co.  Casinghead Gas or Dry Gas County Count	Address (Give  Address (Give  Is gas actual)  R  New Well	, NMPM,  address to white address to white address to white y connected?  ling order numb	Rddy  ch approved co  lland, Te  ch approved co  When  P.B	opy of this form is to popy of	o be sent)
DESIGNATION OF TRANSPO Name of Authorized Transporter of Texas—New Mex Name of Authorized Transporter of name If well produces oil or liquids, give location of tanks.  If this production is commingled COMPLETION DATA  Designate Type of Comple Date Spudded	RTER OF OIL AND NATURAL OF COLOR OF Condensate Completions Co.  Casinghead Gas or Dry Gas Country Country Cas Country	Address (Give  Bex  Address (Give  Is gas actual)  R  New Well  Total Depth	, NMPM,  address to white address to white address to white y connected?  ling order numb	Rddy  ch approved co  lland, Te  ch approved co  When  P.B	ppy of this form is to	o be sent)
DESIGNATION OF TRANSPO Name of Authorized Transporter of Texas—New Mex Name of Authorized Transporter of name If well produces oil or liquids, give location of tanks.  If this production is commingled COMPLETION DATA  Designate Type of Comple Date Spudded	RTER OF OIL AND NATURAL OF COLOR OF Condensate Completions Co.  Casinghead Gas or Dry Gas Country Country Cas Country	Address (Give  Bex  Address (Give  Is gas actual)  R  New Well  Total Depth	, NMPM,  address to white address to white address to white y connected?  ling order numb	Rddy  ch approved co  illand, Te  ch approved co  When  Pluc  P.B	ppy of this form is to	o be sent)
DESIGNATION OF TRANSPO Name of Authorized Transporter of Texas—New Mex Name of Authorized Transporter of none If well produces oil or liquids, give location of tanks.  If this production is commingled COMPLETION DATA  Designate Type of Comple Date Spudded	Range  RETER OF OIL AND NATURAL  Cil  or Condensate   ice Pipeline Co.  Casinghead Gas or Dry Gas   Unit  Sec. Twp. Rge.  P	GAS Address (Give Bex Address (Give Is gas actual) B no ol, give comming New Well Total Depth Top Oil/Gas 1	, NMPM,  staddress to white  1510 - Mic  address to white  y connected?  Ling order numb  Workever De-	Rddy  ch approved co  illand, Te  ch approved co  When  Pluc  P.B	ppy of this form is to	o be sent)
DESIGNATION OF TRANSPO Name of Authorized Transporter of Texas—New Mex Name of Authorized Transporter of name If well produces oil or liquids, give location of tanks.  If this production is commingled COMPLETION DATA  Designate Type of Comple Date Spudded  Pool  Perforations	Range  RETER OF OIL AND NATURAL  OIL OF Condensate   Ico Pipeline Co.  Casinghead Gas or Dry Gas   Unit Sec. Twp. Rge.  P 32 178 30  with that from any other lease or poor  tion — (X)  Date Compl. Ready to Prod.  Name of Producing Formation.	Address / Give  Bex  Address / Give  Is gas actuall  Is pool, give comming  New Weil V  Total Depth  Top Oil/Gas i	, NMPM,  address to white address to white address to white y connected?  ling order numb  Workever De-	Rddy  ch approved co  illand, Te  ch approved co  When  Pluc  P.B	ppy of this form is to	o be sent)
DESIGNATION OF TRANSPO Name of Authorized Transporter of Texas—New Mex Name of Authorized Transporter of none If well produces oil or liquids, give location of tanks.  If this production is commingled COMPLETION DATA  Designate Type of Comple Date Spudded	Range  RETER OF OIL AND NATURAL  Cil  or Condensate   ice Pipeline Co.  Casinghead Gas or Dry Gas   Unit  Sec. Twp. Rge.  P	Address / Give  Bex  Address / Give  Is gas actuall  Is pool, give comming  New Weil V  Total Depth  Top Oil/Gas i	, NMPM,  staddress to white  1510 - Mic  address to white  y connected?  Ling order numb  Workever De-	Rddy  ch approved co  illand, Te  ch approved co  When  Pluc  P.B	ppy of this form is to	o be sent)  o be sent)
DESIGNATION OF TRANSPO Name of Authorized Transporter of Texas—New Mex Name of Authorized Transporter of name If well produces oil or liquids, give location of tanks.  If this production is commingled COMPLETION DATA  Designate Type of Comple Date Spudded  Pool  Perforations	Range  RETER OF OIL AND NATURAL  OIL OF Condensate   Ico Pipeline Co.  Casinghead Gas or Dry Gas   Unit Sec. Twp. Rge.  P 32 178 30  with that from any other lease or poor  tion — (X)  Date Compl. Ready to Prod.  Name of Producing Formation.	Address / Give  Bex  Address / Give  Is gas actuall  Is pool, give comming  New Weil V  Total Depth  Top Oil/Gas i	, NMPM,  address to white address to white address to white y connected?  ling order numb  Workever De-	Rddy  ch approved co  illand, Te  ch approved co  When  Pluc  P.B	ppy of this form is to	o be sent)
DESIGNATION OF TRANSPO Name of Authorized Transporter of Texas—New Mex Name of Authorized Transporter of name If well produces oil or liquids, give location of tanks.  If this production is commingled COMPLETION DATA  Designate Type of Comple Date Spudded  Pool  Perforations	Range  RETER OF OIL AND NATURAL  OIL OF Condensate   Ico Pipeline Co.  Casinghead Gas or Dry Gas   Unit Sec. Twp. Rge.  P 32 178 30  with that from any other lease or poor  tion — (X)  Date Compl. Ready to Prod.  Name of Producing Formation.	Address / Give  Bex  Address / Give  Is gas actuall  Is pool, give comming  New Weil V  Total Depth  Top Oil/Gas i	, NMPM,  address to white address to white address to white y connected?  ling order numb  Workever De-	Rddy  ch approved co  illand, Te  ch approved co  When  Pluc  P.B	ppy of this form is to	o be sent)
DESIGNATION OF TRANSPO Name of Authorized Transporter of Texas—New Mex Name of Authorized Transporter of name If well produces oil or liquids, give location of tanks.  If this production is commingled COMPLETION DATA  Designate Type of Comple Date Spudded  Pool  Perforations	Range  RETER OF OIL AND NATURAL  OIL OF Condensate   Ico Pipeline Co.  Casinghead Gas or Dry Gas   Unit Sec. Twp. Rge.  P 32 178 30  with that from any other lease or poor  tion — (X)  Date Compl. Ready to Prod.  Name of Producing Formation.	Address / Give  Bex  Address / Give  Is gas actuall  Is pool, give comming  New Weil V  Total Depth  Top Oil/Gas i	, NMPM,  address to white address to white address to white y connected?  ling order numb  Workever De-	Rddy  ch approved co  illand, Te  ch approved co  When  Pluc  P.B	ppy of this form is to	o be sent)  o be sent)
DESIGNATION OF TRANSPO Name of Authorized Transporter of Texas—New Mex Name of Authorized Transporter of none If well produces oil or liquids, give location of tanks.  If this production is commingled COMPLETION DATA  Designate Type of Comple Date Spudded  Pool  Perforations  HOLE SIZE	RTER OF OIL AND NATURAL  Cil  or Condensate   ice Pipeline Co.  Casinghead Gas or Dry Gas   Unit  Sec. Twp. Rge.  P  32  178 30  with that from any other lease or poor  tion - (X)  Date Compl. Ready to Prod.  Name of Producing Formation.  TUBING, CASING, A  CASING & TUBING SIZE  FOR ALLOWABLE (Test must be	Address (Give Bex Address (Give Is gas actual) Is pol, give comming New Well Total Depth Top Oil/Gas I	pay  RECORD EPTH SET  total volume of all 24 hours)	Rddy  Ch approved co  Iland, Tech approved co  When  P.B  Tub  Dep	ppy of this form is to the state of this form is to the state of this form is to the state of th	o be sent)  o be sent)  ov. Diff. Res
DESIGNATION OF TRANSPO  Name of Authorized Transporter of  Texas—New Mex  Name of Authorized Transporter of  name  If well produces oil or liquids, qive location of tanks.  If this production is commingled  COMPLETION DATA  Designate Type of Comple  Date Spudded  Pool  Perforations	RTER OF OIL AND NATURAL  Cil  or Condensate   ice Pipeline Co.  Casinghead Gas or Dry Gas   Unit  Sec. Twp. Rge.  P  32  178 30  with that from any other lease or poor  tion - (X)  Date Compl. Ready to Prod.  Name of Producing Formation.  TUBING, CASING, A  CASING & TUBING SIZE  FOR ALLOWABLE (Test must be	Address (Give Bex Address (Give Is gas actual) Is pol, give comming New Well Total Depth Top Oil/Gas I	s address to which the address	Rddy  Ch approved co  Iland, Tech approved co  When  P.B  Tub  Dep	ppy of this form is to the state of this form is to the state of this form is to the state of th	o be sent)  o be sent)  ov. Diff. Rest
DESIGNATION OF TRANSPO Name of Authorized Transporter of Texas—New Mex Name of Authorized Transporter of name If well produces oil or liquids, give location of tanks.  If this production is commingled COMPLETION DATA  Designate Type of Comple Date Spudded  Pool  Perforations  HOLE SIZE  TEST DATA AND REQUEST OIL WELL Date First New Oil Bun To Tanks	RTER OF OIL AND NATURAL Cil or Condensate  ice Pipeline Co.  Casinghead Gas or Dry Gas  Unit Sea. Twp. Rge. P 32 178 30  with that from any other lease or pool tion — (X)  Date Compl. Ready to Prod.  Name of Producing Formation  TUBING, CASING, A  CASING & TUBING SIZE  FOR ALLOWABLE (Test must be able for this	Address (Give Box Address (Give Is gas actual) B no ol, give comming! New Weil V Total Depth Top Oil/Gas I	total volume of il 24 hours) hod (Flow, pump	Rddy  ch approved co  illand, Te  ch approved co  When  P.B  Tub  Dep	ppy of this form is to	o be sent)  o be sent)  ov. Diff. Res
DESIGNATION OF TRANSPO Name of Authorized Transporter of Texas—New Mex Name of Authorized Transporter of name If well produces oil or liquids, give location of tanks.  If this production is commingled COMPLETION DATA  Designate Type of Comple Date Spudded  Pool  Perforations  HOLE SIZE  TEST DATA AND REQUEST OIL WELL	PRTER OF OIL AND NATURAL  Cil  or Condensate   ice Pipeline Co.  Casinghead Gas or Dry Gas   Unit  Sec. Twp. Rge.  P  32  175  30  with that from any other lease or pool  tion - (X)  Date Compl. Ready to Prod.  Name of Producing Formation.  TUBING, CASING, A  CASING & TUBING SIZE  FOR ALLOWABLE (Test must be able for this	Address (Give Bex Address (Give Is gas actual) Is pol, give comming New Well Total Depth Top Oil/Gas I	total volume of il 24 hours) hod (Flow, pump	Rddy  ch approved co  illand, Te  ch approved co  When  P.B  Tub  Dep	ppy of this form is to the state of this form is to the state of this form is to the state of th	o be sent)  o be sent)  ov. Diff. Rest

**GAS WELL** 

Actual Prod. Test-MCF/D

Testing Method (pitot, back pr.)

VI. CERTIFICATE OF COMPLIANCE

Length of Test

Tubing Pressure

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

District Clerk

July 1, 1965

Gravity of Condensate

Choke Size

OIL CONSERVATION COMMISSION
JUL 1 4 1955 APPROVED CAL DEEP CAS MESTED VIOL

Bbls, Condensate/MMCF

Casing Pressure

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 recompleted wells.

 $\,$  Fill out Sections I, II, III, and VI only 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.