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NEW MEXICO OIL CONSERVATION COM
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

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JUL 11 1973

Operator General American Oil Company of Texas		O. C. C.	
Address P. O. Box 416 Loco Hills, New Mexico 88255		ARTESIA, OFFICE	
Reason(s) for filing (Check proper box) New Well <input type="checkbox"/> Recompletion <input checked="" type="checkbox"/> Change in Ownership <input type="checkbox"/>		Other (Please explain) Request well be placed in Fren Pool from Grayburg Jackson Pool due to recompletion.	
Change in Transporter of: Oil <input type="checkbox"/> Casinghead Gas <input type="checkbox"/>		Dry Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	

If change of ownership give name and address of previous owner

I. DESCRIPTION OF WELL AND LEASE

Lease Name McIntyre "H"	Well No. 1	Pool Name, Including Formation Fren (Seven Rivers)	Kind of Lease State, Federal or Fee Fed. NM-	Lease No. 0384577
Location Unit Letter L ; 1980' Feet From The South Line and 660' Feet From The West Line of Section 15 Township 17-S Range 30-E , NMPM, Eddy County				

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Navajo Refing Co. Pipe Line Div.	Address (Give address to which approved copy of this form is to be sent) N. Freeman Ave. Artesia, New Mexico 88210			
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips Petroleum Co.	Address (Give address to which approved copy of this form is to be sent) Phillips Building Odessa, Texas			
If well produces oil or liquids, give location of tanks.	Unit B	Sec. 21	Twp. 17-S	Rge. 30-E
Is gas actually connected?		When 11-9-72		

If this production is commingled with that from any other lease or pool, give commingling order number: **Former zones CTB-241**
Recompletion will not be commingled.

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		X		X		X		X
Date Spudded	Date Compl. Ready to Prod. 7-4-73		Total Depth 3350'		P.B.T.D. 2346'			
Elevations (DF, RKB, RT, GR, etc.) 3698' RKB	Name of Producing Formation Seven Rivers		Top Oil/Gas Pay 1752'		Tubing Depth 2300'			
Perforations 1755'-1761' (12 holes)					Depth Casing Shoe 3350'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4	8 5/8"		538'		100			
7 7/8"	4 1/2"		3347'		850			
	2 3/8"		2300					

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (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 July 5, 1973	Date of Test July 10, 1973	Producing Method (Flow, pump, gas lift, etc.) Pump and Flow	
Length of Test 24 hours	Tubing Pressure ---	Casing Pressure 150#	Choke Size Open
Actual Prod. During Test	Oil-Bbls. 1.5	Water-Bbls. 10 BLW	Gas-MCF 600

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

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.

W. A. Grissett
(Signature)
District Superintendent
(Title)
July 10, 1973
(Date)

OIL CONSERVATION COMMISSION
APPROVED **JUL 17 1973**
BY **W. A. Grissett**
TITLE **OIL AND GAS INSPECTOR**

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 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.