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U.S.G.S.	
AND OFFICE	
TRANSPORTER	OIL 1 GAS 1
OPERATOR	1
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COM SION
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

RECEIVED

Operator General American Oil Company of Texas	DEC 11 1974
Address P. O. Box 416 Loco Hills, New Mexico 88255	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name Burch "B"	Well No. 29	Pool Name, including Formation Grayburg-Jackson & San And.	Kind of Lease State, Federal or Fee Fed. LC-028784-93(b)	Lease No.
Location Unit Letter H ; 1345 Feet From The North Line and 25 Feet From The East Line of Section 23 Township 17-S Range 29-E , NMPM, Eddy County				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> Navajo Refining Co. Pipeline Division	Address (Give address to which approved copy of this form is to be sent) North Freeman Avenue Artesia, N. M. 88210					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips Petroleum Company	Address (Give address to which approved copy of this form is to be sent) Phillips Building Odessa, Texas 79760					
If well produces oil or liquids, give location of tanks.	Unit G	Sec. 23	Twp. 17-S	Rge. 29-E	Is gas actually connected? Yes	When December 1, 1974

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

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded October 15, 1974	Date Compl. Ready to Prod. December 1, 1974		Total Depth 3425'		P.B.T.D. 3419'			
Elevations (DF, RKB, RT, GR, etc.) 3604 GR	Name of Producing Formation Grayburg & San Andres		Top Oil/Gas Pay 2468'		Tubing Depth 3365'			
Perforations 2468'-2479'; 2684'-2692'; 2891'-2895'; 2930'-2934'; 3044'-3048'; 3020'-3024'; 3175'-3185'					Depth Casing Shoe 3425'			

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-1/4"	8-5/8" OD 20#	414' KB	100
7-7/8"	4-1/2" OD 9.5# & 10.5#	3425' KB	350
	2" EUE 4.7#	3365'	

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 December 1, 1974	Date of Test December 4, 1974	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 Hours	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test 180 Barrels	Oil-Bbls. 80	Water-Bbls. 100 BLW	Gas-MCF 80

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

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. E. Walter (Signature)
Acting District Superintendent
(Title)
December 10 1974
(Date)

OIL CONSERVATION COMMISSION

APPROVED DEC 12 1974
BY W. A. Gressett
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 deepene 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 allow able 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 multiple.