NO. OF COPIES REC	j		
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SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PRORATION OF			

October 1, 1968

(Date)

II.

III.

IV.

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-104

FILE	REQUEST FOR ALLOWABLE			Supersedes Old C-104 and C-11 Effective 1-1-65			
U.S.G.S.	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS						
LAND OFFICE	_		001 - 11	57 AH 'S	8		
TRANSPORTER GAS							
OPERATOR PRORATION OFFICE	-						
Operator	· ·						
Murphy H. Ba					·		
	ne Southwest	, Midland, Te	xas 79701				
Reason(s) for filing (Check proper box			Othe	r (Please expl	ain)		·
Recompletion	Oil	Transporter of: Dry G	as T				
Change in Ownership	Casinghead		ensate				
If change of ownership give name pand address of previous owner	an American	Petroleum Cori	D. Box 68.	Hobbs, N	ew Mexico		
and address of previous owner							
DESCRIPTION OF WELL AND Lease Name	Well No. Pool Name, Including Formation Kind of			of Lease	Lease Lease No.		
State "CL"	2	E-K Queen		State	e, Federal or Fee	State	Least No.
Location M 990)	South	852		\	West	
omit Letter ;			ne and	Fe	et From The	_	
Line of Section 6	wnship 18-S	Range	34-E	, NMPM,		Lea	County
DESIGNATION OF TRANSPOR	TER OF OIL A	ND NATURAL GA	AS				
Name of Authorized Transporter of Oil	or Con	densate 🗀	Address (Give		ch approved copy		to be sent)
Texas-New M Name of Authorized Transporter of Case	singhead Gas 📉	xico Pipe Line Co. Box 1510, Midland, Texas 79701 Address (Give address to which approved copy of this form is to be sent)				to be sent)	
Phillips Petrole					Odessa, Tex	as 79760	
If well produces oil or liquids, give location of tanks.	L Sec.	Tiss 34E	Is gas actually	connected?	When 6-7	7-62	
If this production is commingled with COMPLETION DATA	th that from any	other lease or pool,	give commingli	ng order numl	ber:		
Designate Type of Completic		Well Gas Well	New Well Wo	orkover De	epen Plug B	ack Same Res	o'v. Diff. Res'v.
Date Spudded	Date Compl. Red	idy to Prod.	Total Depth		P.B.T.	.D.	<u> </u>
Elevations (DF, RKB, RT, GR, etc.)	Name of Produci	ng Formation	Top Oil/Gas Po	ıy	Tubing	g Depth	
Perforations					Depth	Casing Shoe	
	TII	BING, CASING, AN	CEMENTING	DECORD	·		
HOLE SIZE		TUBING SIZE	1	PTH SET		SACKS CEM	MENT
TEST DATA AND REQUEST FO	OR ALLOWABI		fter recovery of to pth or be for full :	tal volume of . 24 hours)	load oil and must	be equal to or e	xceed top allow-
Date First New Oil Run To Tanks	Date of Test		Producing Metho	od (Flow, pum;	o, gas lift, etc.)		
Length of Test	Tubing Pressure		Casing Pressure	b	Choke	Size	
Actual Prod. During Test	Oil-Bbls.		Water - Bbls.				
Actual Floa. During 1891	On-Bbis.		wdter - DDIS.		Gas • M	.CF	
CAS WOT -							
GAS WELL Actual Prod. Test-MCF/D	Length of Test		Bbls. Condensa	te/MMCF	Gravity	of Condensate	
The state of the s							
Testing Method (pitot, back pr.)	Tubing Pressure	(Shut-in)	Casing Pressure	(spac-ru	Choke	Size	
CERTIFICATE OF COMPLIANC	CE CE			OIL CONS	ERVATION (COMMISSION	<u> </u>
hereby certify that the rules and re	equiptions of the	Oil Connervation	APPROVED	L			19
Commission have been complied was bove is true and complete to the	ith and that the	information given		lio -	1. 11	lend	nt.
and complete to the	July Milo	Deliel.	BY /	Oil &	Ges maper	(1)	
7.11			TITLE				
W.M. Jun	· M-		i		led in complian or allowable for		
(Signa Petroleum Eng i	ture) W. U.	Sumner	well, this for	rm must be a	ccompanied by a	a tabulation of	the deviation
renoieum Engi	I I I I I I I I I I I I I I I I I I I		A11	ions of this f	orm must be fill	ed out compte	tals for allow-

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.