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U.S.G.S.		<u> </u>	<u> </u>
LAND OFFICE			
TRANSPORTER	OIL		
	GAS	<u></u>	<u> </u>
OPERATOR			_
PRCRATION OFFICE			<u> </u>

## NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE AND

Form C-104 Supersedes Old C-164 and C-110 Effective 1-1-65

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

-	LAND OFFICE						
	IRANSPORTER GAS						
	OPERATOR						
1.	PRORATION OFFICE						
	Manzano Oil Corporat	Manzano Oil Corporation 505/623-1996					
P.O. Box 2107/Roswell, NM 88202-2107  Reason(s) for filing (Check proper box)  New Well.  Other (Please explain)  Change in Transporter of:  Other (Please explain)  Change In Transporter of:							
						New well.  Change in Transporter of:  Dry Gas  Change Velkse  Change in Transporter of:	
Change in Ownership XX Casinghead Gas Condensate							
•	change of ownership give name  Grace Petroleum Corporation, 6501 N. Broadway, Okla City, OK						
	a delice of previous owner	well changed from West Tonto "A" Fed Com #1/12/8/88 7316-8298					
11.	DESCRIPTION OF WELL AND L	EASE Weil No. Pool Name, Including For		Lease No.			
* McKamey Federal 1-Y East Lusk (Morrow) State, Federal of				Gler Fee Fed NM-14790			
	Court Letter L : 2430 Feet Form Find Land Letter L : 2430 Feet Form Find Land Letter L : 2430 Feet Form Find L : 243						
Line of Section 25 Township 19S Bange 32E , NMPM, Lea Cou							
111	11. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  or Condensate [V] Address (Give address to which approved copy of this form is to be sent,						
•••	Name of Authorized Transporter of Oil or Condensate &						
	Transporter of Cas	The standard Transporter of Casinghead Gas cr Dry Gas X Address (Give address to which approved copy of					
	Gas Company of New	Mexico	Is gas actually connected? W	hen			
	It well produces oil or liquids, I give location of tanks.	L 25 19S 32E	yes	7/8/82			
	f this production is commingled with that from any other lease or pool, give commingling order number:						
IV.	COMPLETION DATA	On Well Gas Well	New Well Workover Deepen	Plug Back   Same Resty, Ditt. Resty.			
	Designate Type of Completio	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.			
	Date Spudded	Date Compt. Reday to 1 four		7			
	Elevations (DF, RAB, RT, GR, etc.,	Name of Producing Formation	Top Oil/Gas Pay	Tubing Destin			
	Periorations			Depth Casing Snce			
	TUBING, CASING, AND CEMENTING RECORD						
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT			
				U and must be equal to or exceed top allow-			
V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or each to the for full 24 hours)							
	OIL WELL Date First New Ci. Bun To Tanks	Date of Test	Producing Method (Flow, pump, gas	lift, etc.)			
	Length of Test	Tubing Pressure	Casing Pressure	Chore Size			
		To a Para	Water-Bbls.	Gaa-MCF			
	Actual Prod. During Test	Oil-Bbis.					
	GAS WELL Actual Prog. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate			
	Astua, Prod. 1001-100170		Cosing Pressure (Shut-in)	Cnoxe Size			
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Size 1-)				
VI	CERTIFICATE OF COMPLIANCE		OIL CONSER	ATION COMMISSION			
•	I hereby certify that the rules and regulations of the Oil Conservation		APPROVED	, 19			
				ONED BY JERRY SEXTON			
Commission have been complied with and that the best of my knowledge and belief, above is true and complete to the best of my knowledge and belief.		DISTRICT I SUPERVISOR					
		TITLE	TITLE This form is to be filed in compliance with RULE 1104.				
(Signature)  Jackie Midkiff/Landwoman 12/8/88			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 recomplated wells.				
						Fill out only Sections I. II. III. and VI for changes of owner,	
							(E

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