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LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION
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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SEP 2 1969

O. C. C.

APPROPRIATE OFFICE

I. Operator **General American Oil Company of Texas**

Address **P. O. Box 416, Loco Hills, New Mexico 88255**

Reason(s) for filing (Check proper box) New Well Recompletion Change in Ownership

Change in Transporter of: Oil Gas Dry Gas Condensate

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Keely C	Well No. 45	Pool Name, including Formation Square Lake	Kind of Lease State, Federal or Fee Federal	Lease No. 028784 (c)
Location Unit Letter H ; 1980 Feet From The North Line and 735 Feet From The East				
Line of Section 13 Township 17-S Range 29-E , NMPM, Eddy County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Pernian Oil Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 3119, Midland, Texas 79701			
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> Vented at present time.	Address (Give address to which approved copy of this form is to be sent)			
If well produces oil or liquids, give location of tanks.	Unit H	Sec. 13	Twp. 17S	Rge. 29E
	Is gas actually connected?		When	
	No			

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded	Date Compl. Ready to Prod. 8/25/69	Total Depth 11402' *	P.B.T.D. 2696'					
Elevations (DF, RKB, RT, GR, etc.) 3634' GL	Name of Producing Formation Matex	Top Oil/Gas Pay 2507'	Tubing Depth 2500'					
Perforations 2507'-09', 2515'-19', 2551'-57', 2560'-63'	Depth Casing Shoe 2745'							
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
	13 3/8"	321'	300					
	9 5/8"	2745'	1500					

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 8/25/69	Date of Test 9/1/69	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 Hours	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls. 85	Water - Bbls. 0	Gas - MCF Vented

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.

Ray Crow
(Signature)

Asst. District Superintendent

September 2, 1969

(Date)

OIL CONSERVATION COMMISSION
SEP 2 1969
APPROVED _____, 19____
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 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.

Memphis Carthage Dean Unit #2. plugged back and recompleted as Keely C #45