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U.S.G.S.			
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OPERATOR		1	[
PRORATION OFFICE			

Jan. 7, 1977

(Date)

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-104

	SANTA FE	1	FOR ALLOWABLE	Supersedes Old C-104 and C-11		
	FILE /		AND AND NATURAL O	Effective 1-1-65		
	U.S.G.S.	AUTHORIZATION TO TRA	ANSPORT OIL AND NATURAL O	GAS		
	TRANSPORTER OIL					
	GAS /					
	OPERATOR /					
I.	PRORATION OFFICE Operator	- Time Time Time	CFFIDE			
	WINDFOHR OIL COMPANY					
	Address					
	Box #198, Artesia, N	New Mexico 88210	101 (0)			
	Reason(s) for filing (Check proper box	Change in Transporter of:	Other (Please explain)	from water injection to		
	Recompletion	Oil Dry Go		s from water injection to		
	Change in Ownership	Casinghead Gas Conde				
	If change of ownership give name					
	and address of previous owner					
	DESCRIPTION OF WELL AND	I DACE				
11.	Lease Name	Well No. Pool Name, Including F	ormation Kind of Lease	Lease No.		
(rayburg Jackson San And	ires 24 Grayburg Jack	son, 1GB-SA State, Federa	I or Fee Fed. LC=029338		
	Location		-			
	Unit Letter H ; 66	60 Feet From The <u>east</u> Lir	ne and 1980 Feet From T	The north		
	1.4 To	wnship 17 South Range 3	SO Fact , NMPM, Fddy	County		
	Line of Section 14 To	whenth 11 200 file reads	30 East NMPM, Eddy	County		
III.	DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL GA	ıs			
	Name of Authorized Transporter of Oi		Address (Give address to which approx			
	Texas New Mexico Pipe	Line Co.	Box #1510, Midland, Te Address (Give address to which approx	Xas		
	Continental Oil Compa		Ponca City, Oklahoma	to be senty		
	If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected? Whe	en		
	give location of tanks.	K 13 17 30				
	If this production is commingled w	ith that from any other lease or pool,	give commingling order number:			
IV.	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.		
	Designate Type of Completi			1 1 1		
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
		Dec. 23, 1976	3500	34/2		
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth		
	3708 DF		2950 3206	3010 Depth Casing Shoe		
	0 H- 32-06-341	2		2772 3206		
	TUBING, CASING, AND CEMENTING RECORD					
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
	(See original recor	d)				
V.	TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a	ifter recovery of total volume of load oil	and must be equal to or exceed top allow-		
• •	OIL WELL	able for this de	epth or be for full 24 hours) Producing Method (Flow, pump, gas life			
	Date First New Oil Run To Tanks	Date of Test		ال ۱۸ (۱۳۰۰)		
	Dec. 23, 1976 Length of Test	Dec. 23, 1976 Tubing Pressure	Flow Casing Pressure	Choke Size		
				1 1 2 1		
	24 Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF		
		1.5	140	J. V. J.		
	CAC WELL			(b)		
	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		
			<u> </u>	<u> </u>		
VI.	CERTIFICATE OF COMPLIANCE Thereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given		OIL CONSERVA	TION COMMISSION		
			APPROVED JAN 101977 De Gressett			
	above is true and complete to th	e best of my knowledge and belief.	SUPERVISOR,			
	_		TITLE			
	Raint Y ling		II = ====	compliance with RULE 1104.		
Rayh I may		111ing	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			
	<i>y</i> 1		tests taken on the well in accor	dance with RULE 111.		
	Consulting Engineer		All sections of this form mu	at be filled out completely 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.