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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 1-1-55

RECEIVED

MAR 15 1965

Operator	Hugh L. Johnston, Sr., Johnston	O. C. C. ARTESIA, OFFICE	
Address	831 Petroleum Building, Roswell, New Mexico		
Reason(s) for filing (Check proper box)	Other (Please explain)		
New Well <input type="checkbox"/>	Change in Transporter of:	To show connection of Gas by Pan American Petroleum Corporation	
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

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Continental State	Well No.	1	Pool Name, including Formation	Undesignated - Grayburg-Jackson	Kind of Lease	State				
Location	Unit Letter L	1914	Feet From The South	Line and 401	Feet From The West	Line of Section 30	Township 17 South	Range 29 East	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"/>	The Permian Corporation	Address (Give address to which approved copy of this form is to be sent)	Box 4157, Midland, Texas					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Pan American Petroleum Corporation	Address (Give address to which approved copy of this form is to be sent)	Box 68, Hobbs, New Mexico					
If well produces oil or liquids, give location of tanks.	Unit L	Sec. 30	Twp. 17	Rge. 29	Is gas actually connected?	Yes	When	February 22, 1965

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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.R.T.D.					
Pool	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
Perforations	TUBING, CASING, AND CEMENTING RECORD			DEPTH SET		SACKS CEMENT		
	HOLE SIZE	CASING & TUBING SIZE						

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	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	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.

Nancy King
(Signature)

Agent

(Title)

March 12, 1965

(Date)

OIL CONSERVATION COMMISSION

MAR 15 1965

APPROVED _____, 19

BY *M.L. Armstrong*

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 Sections I, II, III, and VI only 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.