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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-101 and C-111
Effective 1-1-65

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FEB 15 1978

Operator **General American Oil Company of Texas** ✓

Address **P. O. Box 128 Loco Hills, New Mexico 88255**

O. C. C.
ARTESIA, OFFICE

Reason(s) for filing (Check proper box) Other (Please explain)

New Well ☐ Change in Transporter of ☐

Recompletion ☐ Oil ☐ Dry Gas ☐ **Converted from Water Injection Well**

Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

If change of ownership give name and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
G-J Premier Sand Ut.Tr.AD	9	Grayburg-Jackson	State, Federal or Fee Federal NM-0467934	

Location

Unit Letter **"A"** ; **330** Feet From The **North** Line and **640** Feet From The **East**

Line of Section **34** Township **17-S** Range **30-E** , NMPM, **Eddy** County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐	Address (Give address to which approved copy of this form is to be sent)
Navajo Refining Company <i>Lipine Div.</i>	North Freeman Avenue Artesia, N. M. 88210
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)

If well produces oil or liquid, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	K	27	17-S	30-E	NO	

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

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Reservoir	Diff. Reservoir
	X							

Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
7-9-65		3332	3300
Elevations (OF, RAD, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
3554 gr.	Grayburg	3260	
Perforations			Depth Casing Shoe
OH 3260-3300			3260

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
10"	8 5/8"	350	100
8"	5 1/2"	3260	150

TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of lost 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.)
February 1, 1978	February 3, 1978	Flow
Length of Test	Tubing Pressure	Casing Pressure
24 hours		
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.
	25	75
		Gas-MCF
		NONE

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Ebls. Condensate/MMCF	Gravity of Condensate
Testing Method (prior, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
			8"

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.

Lendell Hawkins
Assistant Field Superintendent
February 14, 1978

OIL CONSERVATION COMMISSION
APPROVED **FEB 17 1978**
BY **W. A. Gussert**
TITLE **SUPERVISOR, DISTRICT II**

This form is to be filed in compliance with RULE 6.1104.
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the shut-in tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for allowables on new and recompleted wells.
Fill out only Sections I, IV, VI, and VII for change of name, well name or number, or transporter or other such change of condition.