٢	NO. OF COPIES RECEIVED 5	<u>.</u>	· · · · · · · · · · · · · · · · · · ·		
-	DISTRIBUTION	NEW MEXICO OIL C	CONSERVATION COMMISSION	Form C -104	
H	SANTA FE /		FOR ALLOWABLE	Supersedes Old C-104 and C-110	
H	FILE /-	KEWOE31	AND	Effective 1-1-65	
\vdash	u.s.g.s.	AUTHORIZATION TO TR	ANSPORT OIL AND NATURAL G	A S	
ŀ	LAND OFFICE	AUTHORIZATION TO TRA	ANSPORT OIL AND NATORAL OF	RECEIVED	
ŀ	OIL /	•	<i>*</i>		
l	TRANSPORTER		<u></u>	•	
L	GAS			JUN 2 0 1966	
-	OPERATOR 2				
Ļ	PRORATION OFFICE Operator			O. C. C.	
L	Tenneco Oil Company		·	ARTESIA, OFFICE	
l	Address Box 1031 Midland, Tex	2.8			
ŀ	Reason(s) for filing (Check proper box)		Other (Please explain)		
ı	New Well	Change in Transporter of:			
ı	Recompletion	Oil · Dry G	as 🔲		
ı	Change in Ownership	Casinghead Gas Conde	ensate		
L					
	f change of ownership give name and address of previous owner				
1	DESCRIPTION OF WELL AND I	EASE	ame, Including Formation	Kind of Lease 12 10711	
Ī	Lease Name	Lease No. Well No. Pool No	ame, including Formation	State, Edward on Fee	
ļ	State N	B-10714 4 Gray	ourg Jackson SA	State, Estate	
t	Location 670		2298		
١	Unit Letter E : 570	Feet From The West Li	ne and 2190 Feet From T	he North	
l	Onit Letter				
	Line of Section 22 Tow	nship 17-S Range 2	29-E , NMPM, Eddy	County	
,	DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS				
ŕ	Name of Authorized Transporter of Oil	🛣 or Condensate 🗌	Address (Give address to which approx	ed copy of this form is to be sent)	
ļ	The Permian Corporation		Box 3119 Midland, Te	xas	
ŀ	Name of Authorized Transporter of Cas	inghead Gas or Dry Gas	Address (Give address to which approx	ed copy of this form is to be sent)	
1	Name of Manierra Campana	<u> </u>		·	
		Unit Sec. Twp. Rge.	Is gas actually connected? Whe	n (*)	
l	If well produces oil or liquids, give location of tanks.		E No	i	
l					
	If this production is commingled with that from any other lease or pool, give commingling order number:				
,	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.	
	Designate Type of Completio	011	1		
			Total Depth	P.B.T.D.	
	Date Spudded	Date Compl. Ready to Prod.		2844	
	5-17-66	6-7-66	2900	Tubing Depth	
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	_	
İ		San Andres	2621	2758 Depth Casing Shoe	
	Perforations			- •	
	1/2" hole @ 2780, 2768.	2741, 2726, 2706, 2693	, 2673, 2664, 2652, 2634,	2889	
	& 2621.	TUBING, CASING, AN	AD CEMENTING RECORD	T = = = = = = = = = = = = = = = = = = =	
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
	11	8-5/8	348	175	
	6-3/4	4-1/2	2889	110	
	4-1/2 casing	2-3/8	2758	Production Tubing	
	4-1/5 GERING				
	TEST DATA AND REQUEST FOR ALLOWABLE (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)				
	OIL WELL	. 4010 707 11111	Producing Method (Flow, pump, gas li	ft, etc.)	
	Date First New Oil Run To Tanks	Date of Test		• •	
	6-17-66	6-17-66 Tubing Pressure	Pumo	Choke Size	
	6-17-66 Length of Test	Tubing Pressure	Casing Pressure		
	24 Hr.	20 psi	20 psi Water-Bbls.	Open 2" Gas-MCF	
	24 Hr. Actual Prod. During Test	Oil-Bbis.	Water - Bbls.	GGB - MOF	
	105 bbls.	36	69	TSTM	
		-		112	
	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
				Chaka Siza	
	Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size	
			II OIL CONSEDVA	ATION COMMISSION	

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.

Fowler Hix Production Engineer (Title)

June 17, 1966

APPROVED	JUN 2 0 1966	, 19
(1) /	? Gresset	
	77. 440 450 550 754	<u></u>

TITLE ON AGO GAS INSPECTOS

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 allow able on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner well name or number, or transporten or other such change of condition Separate Forms C-104 must be filed for each pool in multiply completed wells.