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| | NO. OF COPIES RECEIVED | | | |
| | SANTA FE / | 1 | ONSERVATION COMMISSION FOR ALLOWABLE | Form C-104 Supersedes Old C-104 and C-116 |
| | FILE /- | | AND | Effective 1-1-65 |
| | U.S.G.S. | AUTHORIZATION TO TRA | NSPORT OIL AND NATURAL | ¥SECEIVED |
| | TRANSPORTER OIL / GAS / | | | 007. |
| | OPERATOR 2 | | - | OCT 5 1966 |
| I. | Operator Operator | <u> </u> | ······ | ARTERIA - |
| , | Tenneco Oil Company | | | ARTESIA, OFFICE |
| | Box 1031 Midland, To | | Other (Please explain) | |
| | New Well | Change in Transporter of: | _ Change locals | a tanks |
| | Recompletion | Oil Dry Gas | H Change Lease Ma | me well # |
| | Change in Ownership | Casinghead Gas Conden | sate from State 7 | 2 24 |
| | If change of ownership give name and address of previous owner | | | |
| П. | DESCRIPTION OF WELL AND | Well No Pool Name Including Fo | rmation Kind of Leas | se Lease No. |
| | Graybusk Jackson W. U | nit 22 Grayburg Jack | State Feder | al or Fee State B-1266 |
| | Location Unit Letter N ; | . 460 Feet From The South Line | and 1980 Feet From | The west |
| | Line of Section 21 To | wnship 17-S Range (| 29-E , МРМ, Ed | dy County |
| Щ. | | TER OF OIL AND NATURAL GA | S Address (Give address to which appro | and convolution form in to be cent. |
| : | Name of Authorized Transporter of Oil Texas New Mexico Pipe 'Name of Authorized Transporter of Car | Α | Roy1510 Midland Tex | |
| | | singhead Gas X or Dry Gas X | Address (Give address to which appro | |
| | Phillips Pet. Co. If well produces oil or liquids, | Unit Sec. Twp. Rge. | Rm B-2 Phillips Bldg Is gas actually connected? | Odessa, Texas at completion |
| | give location of tanks. | 17-S 29-E | | oduces into existing batt |
| | If this production is commingled wi | th that from any other lease or pool, (| | |
| IV. | COMPLETION DATA | Oil Well Gas Well | New Well Workover Deepen | Plug Back Same Res'v. Diff. Res'v. |
| IV. | Designate Type of Completion | on - (X) | New Well Workover Deepen | |
| IV. | | Oil Well Gas Well | | Plug Back Same Resiv. Diff. Resiv. |
| IV. | Designate Type of Completion | on - (X) | New Well Workover Deepen | |
| IV. | Designate Type of Completion | Oil Well Gas Well Date Compl. Ready to Prod. | New Well Workover Deepen Total Depth | P.B.T.D. |
| IV. | Designate Type of Completic Date Spudded Elevations (DF, RKB, RT, GR, etc.) | Date Compl. Ready to Prod. Name of Producing Formation | New Well Workover Deepen Total Depth | P.B.T.D. Tubing Depth |
| IV. | Designate Type of Completic Date Spudded Elevations (DF, RKB, RT, GR, etc.) | Date Compl. Ready to Prod. Name of Producing Formation | New Well Workover Deepen Total Depth Top Oil/Gas Pay | P.B.T.D. Tubing Depth |
| IV. | Designate Type of Completic Date Spudded Elevations (DF, RKB, RT, GR, etc.) Perforations | Date Compl. Ready to Prod. Name of Producing Formation TUBING, CASING, AND | New Well Workover Deepen Total Depth Top Oil/Gas Pay CEMENTING RECORD | P.B.T.D. Tubing Depth Depth Casing Shoe |
| IV. | Designate Type of Completic Date Spudded Elevations (DF, RKB, RT, GR, etc.) Perforations | Date Compl. Ready to Prod. Name of Producing Formation TUBING, CASING, AND | New Well Workover Deepen Total Depth Top Oil/Gas Pay CEMENTING RECORD | P.B.T.D. Tubing Depth Depth Casing Shoe |
| | Designate Type of Completic Date Spudded Elevations (DF, RKB, RT, GR, etc.) Perforations HOLE SIZE | Date Compl. Ready to Prod. Name of Producing Formation TUBING, CASING, AND CASING & TUBING SIZE OR ALLOWABLE (Test must be as | Total Depth Top Oil/Gas Pay CEMENTING RECORD DEPTH SET | P.B.T.D. Tubing Depth Depth Casing Shoe SACKS CEMENT |
| | Designate Type of Completic Date Spudded Elevations (DF, RKB, RT, GR, etc.) Perforations | Date Compl. Ready to Prod. Name of Producing Formation TUBING, CASING, AND CASING & TUBING SIZE OR ALLOWABLE (Test must be as | New Well Workover Deepen Total Depth Top Oil/Gas Pay CEMENTING RECORD DEPTH SET | P.B.T.D. Tubing Depth Depth Casing Shoe SACKS CEMENT Land must be equal to or exceed top allow- |
| | Designate Type of Completic Date Spudded Elevations (DF, RKB, RT, GR, etc.) Perforations HOLE SIZE TEST DATA AND REQUEST FOIL WELL | Date Compl. Ready to Prod. Name of Producing Formation TUBING, CASING, AND CASING & TUBING SIZE OR ALLOWABLE (Test must be af able for this de | Total Depth Top Oil/Gas Pay CEMENTING RECORD DEPTH SET ter recovery of total volume of load oil oth or be for full 24 hours) | P.B.T.D. Tubing Depth Depth Casing Shoe SACKS CEMENT Land must be equal to or exceed top allow- |
| | Designate Type of Completic Date Spudded Elevations (DF, RKB, RT, GR, etc.) Perforations HOLE SIZE TEST DATA AND REQUEST F OIL WELL Date First New Oil Run To Tanks | Date Compl. Ready to Prod. Name of Producing Formation TUBING, CASING, AND CASING & TUBING SIZE OR ALLOWABLE (Test must be af able for this de | Total Depth Top Oil/Gas Pay CEMENTING RECORD DEPTH SET ter recovery of total volume of load oil oth or be for full 24 hours) Producing Method (Flow, pump, gas in the control of the | P.B.T.D. Tubing Depth Depth Casing Shoe SACKS CEMENT I and must be equal to or exceed top allow- |
| | Designate Type of Completic Date Spudded Elevations (DF, RKB, RT, GR, etc.) Perforations HOLE SIZE TEST DATA AND REQUEST FOIL WELL Date First New Oil Run To Tanks Length of Test | On - (X) Date Compl. Ready to Prod. Name of Producing Formation TUBING, CASING, AND CASING & TUBING SIZE OR ALLOWABLE (Test must be at able for this de | Total Depth Top Oil/Gas Pay CEMENTING RECORD DEPTH SET ter recovery of total volume of load of the or be for full 24 hours) Producing Method (Flow, pump, gas and Casing Pressure) | P.B.T.D. Tubing Depth Depth Casing Shoe SACKS CEMENT I and must be equal to or exceed top allow- lift, etc.) Choke Size |
| | Designate Type of Completic Date Spudded Elevations (DF, RKB, RT, GR, etc.) Perforations HOLE SIZE TEST DATA AND REQUEST FOIL WELL Date First New Oil Run To Tanks Length of Test | On - (X) Date Compl. Ready to Prod. Name of Producing Formation TUBING, CASING, AND CASING & TUBING SIZE OR ALLOWABLE (Test must be at able for this de | Total Depth Top Oil/Gas Pay CEMENTING RECORD DEPTH SET ter recovery of total volume of load of the or be for full 24 hours) Producing Method (Flow, pump, gas and Casing Pressure) | P.B.T.D. Tubing Depth Depth Casing Shoe SACKS CEMENT I and must be equal to or exceed top allow- lift, etc.) Choke Size |
| | Designate Type of Completic Date Spudded Elevations (DF, RKB, RT, GR, etc.) Perforations HOLE SIZE TEST DATA AND REQUEST F OIL WELL Date First New Oil Run To Tanks Length of Test Actual Prod. During Test | Date Compl. Ready to Prod. Name of Producing Formation TUBING, CASING, AND CASING & TUBING SIZE OR ALLOWABLE (Test must be af able for this de Date of Test Tubing Pressure Oil-Bbls. | Total Depth Total Depth Top Oil/Gas Pay CEMENTING RECORD DEPTH SET ter recovery of total volume of load of the or be for full 24 hours) Producing Method (Flow, pump, gas to Casing Pressure) Water-Bbis. | P.B.T.D. Tubing Depth Depth Casing Shoe SACKS CEMENT I and must be equal to or exceed top allow- lift, etc.) Choke Size Gas-MCF |
| ・ The Company of t | Designate Type of Completic Date Spudded Elevations (DF, RKB, RT, GR, etc.) Perforations HOLE SIZE TEST DATA AND REQUEST F OIL WELL Date First New Oil Run To Tanks Length of Test Actual Prod. During Test GAS WELL Actual Prod. Test-MCF/D Testing Method (pitot, back pr.) | Date Compl. Ready to Prod. Name of Producing Formation TUBING, CASING, AND CASING & TUBING SIZE OR ALLOWABLE (Test must be af able for this de able for this de Complete Co | Total Depth Total Depth Top Oil/Gas Pay CEMENTING RECORD DEPTH SET ter recovery of total volume of load of the or be for full 24 hours) Producing Method (Flow, pump, gas to casing Pressure) Water-Bbis. Bbls. Condensate/MMCF Casing Pressure (Shut-in) | P.B.T.D. Tubing Depth Depth Casing Shoe SACKS CEMENT I and must be equal to or exceed top allow- lift, etc.) Choke Size Gas-MCF Gravity of Condensate |
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J. F. Carnes

(Signature)

(Title)

(Date)

Dist. Prod. Eng.

Sept. 29, 1966

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 transporten or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

