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April 16, 1973

(Date)

## NEW MEXICO OIL CONSERVATION COMMI. REQUEST FOR ALLOWABLE AND

Supersedes Old C-104 and C-110 Effective 1-1-65

## AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

U.S.G.S.	RECEIVED					
LAND OFFICE	1		REL	, <u> </u>	<b>₩</b>	
TRANSPORTER GAS	1					
OPERATOR )		APR 1 8 1973				
PRORATION OFFICE						
General American O	il Company	of Texas		), D. C. SIA, DEFICE		
Address P. O. Box 416	Loco Hil	lls, New Mexico	88255			
Reason(s) for filing (Check proper box			Other (Pl	ease explain)		
New We!l	Change in Oil	Transporter of:  Dry Gas			•	
Recompletion Change in Ownership	Casinghed		<u> </u>			
f change of ownership give name			-			
nd address of previous owner	**************************************					
DESCRIPTION OF WELL AND	LEASF. Well No.	Pool Name, Including Fo	ermation Grbg.	Kind of Leas	1	e No.
Burch "C"	32	Grayburg-Jack	kson & SaA.	State, Feder	alor Fee Fed. LC 02879	3-c
Location		- ·•	3000	<b>m</b>	The Wholes	
Unit Letter 0	660 Feet Fro	om The <b>South</b> Line	e and <u>1980</u>	Feet From	The <b>East</b>	
Line of Section 30 To	ownship 17-S	Range	<b>30-</b> Е , и	мрм,	<b>Eddy</b> C	ounty
DESIGNATION OF TRANSPOR	TER OF OIL	AND NATURAL GA	s			
Name of Authorized Transporter of Oi	∐ <b>∑∑</b> or⊂	Condensate	Address (Give agai	_	oved copy of this form is to be sen	
Navajo Refining Company Pipe Line Division			North Freeman Avenue Artesia, N. M. 88210  Address (Give address to which approved copy of this form is to be sent)			
me of Authorized Transporter of Casinghead Gas XX or Dry Gas Phillips Petroleum Company				Odessa, Texas 79760		
If well produces oil or liquids,	Unit Sec	1	Is gas actually cor		hen	
give location of tanks.	0 19		Yes	<u> </u>	3-28-73	
f this production is commingled w	ith that from ar	ny other lease or pool,	give commingling	order number:		
COMPLETION DATA	. "	Oil Well Gas Well	New Well Works	ver Deepen	Plug Back   Same Resty, Diff	. Restv.
Designate Type of Complete	1	X ! Ready to Prod.	X Total Depth		P.B.T.D.	
Date Spudded March 3, 1973		26, 1973	3438!		3432 '	
Elevations (DF, RKB, RT, GR, etc.,		lucing Formation	Top Oil/Gas Pay		Tubing Depth	
3594 GL Grayburg & San Andr Perforations 2745'-2752'(14); 2863'-2868' (10);			2745'		3375 Depth Casing Shoe	
Perforations 2745'-2762'(14 3204'-3212' (16); 3397			3'-2906' (6)	;	34381	
0201 0222 (20), 000	31017 (	TUBING, CASING, AND				
HOLE SIZE	CASING	CASING & TUBING SIZE		TH SET	SACKS CEMENT	
12 1/4"		5/8" 20#	540 ' KB 3438 ' KB		100	
7 7/8"	1	4 1/2" 9.5# 2 3/8" 4.7# EUE		KB	323	
			1			·
TEST DATA AND REQUEST	FOR ALLOWA	ABLE (Test must be a	ifter recovery of tota epth or be for full 24	l volume of load o	il and must be equal to or exceed t	op allou
OIL WELL Date First New Oil Run To Tanks	Date of Test	Bote /b. thin ac	Producing Method	(Flow, pump, gas	lift, etc.)	
March 28, 1973	1 -	1 1, 1973	Pump	)		
Length of Test	Tubing Press	ante.	Casing Pressure		Choke Size	
24 hours	Oil-Bbls.	Oil Phie			Gas-MCF	
Actual Prod. During Test 111 Barrels	40		71 L.W.		50	
					No. and A.	
Actual Prod. Test-MCF/D	Length of Te	nt .	Bbls. Condensate	/MMCF	Gravity of Condensate	
Actual Prod. Test-MCF/D	Conduct 1 age					
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)		Casing Pressure (Shut-in)		Choke Size	
			1	UL CONSER\	ATION COMMISSION	
CERTIFICATE OF COMPLIA	NCE					
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.			APPROVED APR 1 9 1973			
			Well studen			
above is true and complete to t	June or my		ll man	L AND GAS INS	PECTOR	
						•
MESKILL			This form is to be filed in compliance with RULE 1104.  If this is a request for allowable for a newly drilled or despens			
W. E. Walter (Signature)			well, this for	n must be accou n the well in ac	cordance with RULE 111.	201200
District Superintender	nt		All section	one of this form	must be filled out completely f	or allo
	Title)		able 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.