

DISTRIBUTION		7
ANTA FE		1
ILE		1
S.G.S.		1
AND OFFICE		
TRANSPORTER	OIL	1
	GAS	1
OPERATOR		3
PRORATION OFFICE		

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 1-1-65

RECEIVED

Operator		General American Oil Company of Texas ✓		FEB 19 1975	
Address		P. O. Box 416 Loco Hills New Mexico 88255		O. C. C. ARTESIA, OFFICE	
Reason(s) for filing (Check proper box)		Other (Please explain)			
New Well	<input checked="" type="checkbox"/>	Change in Transporter of:			
Recompletion	<input type="checkbox"/>	Oil	<input type="checkbox"/>	Dry Gas	<input type="checkbox"/>
Change in Ownership	<input type="checkbox"/>	Gashead 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	Well Name, Including Formation	Kind of Lease	Lease No.
Burch B	30 Grayburg-Jackson & San Andres	State, Federal or Fee Fed, LC-028784-93(b)	Tr. B
Location			
Unit Letter	N	1295	Feet From The South Line and 2615 Feet From The West
Line of Section	23	Township	17-S Range 29-E, 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"/>	Address (Give address to which approved copy of this form is to be sent)		
Navajo Refining Company Pipe Line Division	N. Freeman Avenue Artesia, New Mexico 88210		
Name of Authorized Transporter of Gashead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)		
Phillips Petroleum Company	Phillips Building Odessa Texas 79760		
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Range
G	23	17-S	29-E
Is gas actually connected?	Yes	When	2-5-75

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

IV. COMPLETION DATA

Designate Type of Completion	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
(X)	X		X					
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
11-11-74	12-9-74		3420'		3414'			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
3581 GR	Grayburg & San Andres		2688'		3350'			
Perforations	2272'-2278'		2284'-2287'		2688'-2694'		2756'-2762'	
2744'-2780'	2822'-2828'		2848'-2852'		2955'-2959'		2981'-2985'	
3053'-3056'		3420'						
TUBING, CASING, AND CEMENTING RECORD 3070'-3076'								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4"	8-5/8"OD 20#		342' KB		100			
7-7/8"	4-1/2"OD 9.5#		3420' KB		400			
	2" EUE 4.7#		3350'					

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.)	
2-5-75	2-1-75	Pumping	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 Hours			X
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
160 bbls.	60	100 Load	30

GAS WELL

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

Roy Crow
Roy Crow (Signature)
District Superintendent
(Title)
February 17, 1975
(Date)

OIL CONSERVATION COMMISSION

APPROVED, FEB 21 1975
BY W. A. Gressett
SUPERVISOR, DISTRICT II
TITLE

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 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.

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