DISTRIBUTION SANTA FE FILE II.

NEW MEXICO OIL CONSERVATION COM-TON REQUEST FOR ALLOWABLE AND

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

	U.S.G.S.	AUTHORIZATION TO TRANSPORT OIL AND NATURAL CHECKIVED		
	TRANSPORTER GAS OPERATOR			MAR 1 1 1976
1.	PROPATION OFFICE			
	David Fasken V			ARTESIA, OFFICE
	Address 608 First National Bank Bldg., Midland, Texas 79701			
	Reason(s) for filing (Check proper bo		Other (Please explain)	
	New Well Change in Transporter of: Recompletion Oil Dry Gas Changed from Indian Basin (Morrow) Gas Change in Ownership Casinghead Gas Condensate Pool to Cemetery (Morrow) Gas Pool If change of ownership give name Effective 3-1-76			
	and address of previous owner	· · · · · · · · · · · · · · · · · · ·		
II.	DESCRIPTION OF WELL AND			
	Ross Federal Comm.	Well No. Pool Name, Including I Cemetery (Mo.	rrow) Gas Pool Kind of Led State, Fede	Fodoma 1 NNT-020705
	Location	00 0 1	1000	1.1
	Unit Letter S; 1980 Feet From The South Line and 1980 Feet From The West			
	Line of Section 4 To	ownship 21-South Range	24-East , NMPM,	Eddy County
III.	DESIGNATION OF TRANSPOR	RTER OF OIL AND NATURAL G		
	Name of Authorized Transporter of Ca Navajo Crude Oil Purc		Address (Give address to which appr Box 175 Artesia, N	· · · · · · · · · · · · · · · · · · ·
	Name of Authorized Transporter of Co		- 1 -	oved copy of this form is to be sent)
	David Fasken			k Bldg., Midland, Texas
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. S 5 21-S 24-E	1	May, 1968
IV.	If this production is commingled with that from any other lease or pool, give commingling order number: COMPLETION DATA			
	Designate Type of Completi	ion - (X)	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
	Florentes (DE DKD DT CD	No. of Bash and Bash	T. 01/0 P	
	Elevations (DF, RKB, RT, GR, etc.,	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
	Perforations			Depth Casing Shoe
		TUBING, CASING, AN	D CEMENTING RECORD	
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
v	TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a	ifter recovery of total volume of load of	l and must be equal to as exceed to allow
	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 allow able 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.)			
		D. C. D. C. D. C.		
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size
	Actual Prod. During Test	Oil-Bbls.	Water - Bble.	Gas-MCF
	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
	Tasting Method (pitol), ober priy	Turny Floores (Sime-In)	County Pressure (Director)	Chore Size
VI.	CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION	
	I hereby certify that the rules and regulations of the Oil Conservation		APPROVED MAR 1 2 1976	
	Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		BY W.a. Gressett	
	John Holmann		TITLE SUPERVISOR, DISTRICT II	
	· · · · · · · · · · · · · · · · · · ·		This form is to be filed in compliance with RULE 1104.	
-	Robert H. Angevine (Signature)		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	
_	Agent		tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for allow-	
	(Title) March 10 1976		sble on new and recompleted wells.	
	March 10, 1976 (Date)		Fit1 out only Sections I. II. III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.	

Sanarata Forms C-104 must be filled for each need in multiply