	KO. OF COFIEE AFCEIVED (0) DISTRIBUTION SANTA FE / FILE / D		ONSERVATION COMM ON FOR ALLOWABLE AND SPOR FOLL XN5 DTURAL	Form C-104 Supersedés Old C-105 and C-110 Effective 1-1-65 GAS
	LAND OFFICE JUN 2 3 1976 JUN 2 3 1976 OPERATOR			
1.	PROBATION OFFICE NAVAJO ('Rude i D. C. C. Operator Gulf Oil Corporation Address Box 670, Hobbs, New Mexico 88240			
	Reason(s) for filing (Check proper box) New Well Recompletion Change in Ownership		in error on May Corporation. Na	rels of condensate moved 31, 1976 by The Permian vajo Crude Oil Purchasing er from this lease.
	If change of ownership give name and address of previous owner			· · · · · · · · · · · · · · · · · · ·
(I .	DESCRIPTION OF WELL AND I Lease Name Inexco "17" Federal Location	Weil No. Pool Name, including Fo 1 Catclaw Draw-	-Morrow State, Fede	ral or Fee Federal 0400877C
		<u>Feet From The South</u> Line	26-E , NMPM,	Eddy County
11.	DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Nome of Authorized Transporter of Oil or Condensate X The Permian Corporation		S Address (Give address to which approved copy of this form is to be sent) Box 3119, Midland, Texas 79701 Address (Give address to which approved copy of this form is to be sent)	
	Name of Authorized Transporter of Cas Southern linion li If well produces oil or liquids,	Unit Sec. Twp. Rgc.	Fidelity anion Jours	Sldg, Dollar Jep. 75201
	give location of tenks. If this production is commingled with COMPLETION DATA	K 17 21-S 26-E h that from any other lease or pool, f	Yes give commingling order number:	March 4, 1975
	Designate Type of Completion	n - (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.
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth Depth Casing Shoe
	TUBING, CASING, AND C		CEMENTING RECORD	
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
v.	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.)
	Longth of Test	Tubing Pressure	Casing Pressure	Choke Size
	Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gae - MCF
	GAS WELL Actual Prod. Test-MCF/D	Longth of Test	Bbls. Condensate/MMCF	Gravity of Condensate
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Coving Pressure (Shut-in)	Choke Size
VI.	CERTIFICATE OF COMPLIANC	CE	A	ATION COMMISSION
	I hereby certify that the rules and regulations of the Oli Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		BY_A, Aressett	
	D. T. Berlin (Signature)		TITLE	
	Area Engineer (Title)		All sections of this form must be filled out completely for allow- able on new and recompleted wells.	
	June 22, 1976 (Date)		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.	