## NO. OF COPIES RECEIVED AMENDED DISTRIBUTION NEW MEXICO OIL CONSERVATION COMMISSION Form C-104 SANTA FE REQUEST FOR ALLOWABLE Supersedes Old C-104 and C-110 AND AUTHORIZATION TO TRANSPORT OIL AND NATURANO 12 01 PH 165 FILE U.S.G.S. LAND OFFICE TRANSPORTER GAS OPERATOR PRORATION OFFICE Operator MURPHY H. BAXTER Addres: 1126 Vaughn Building, Midland, Texas 79704 Reason(s) for filing (Check proper box) Other (Please explain) New Weil Change of Lease Name Recompletion Dry Gas Change in Ownership Casinghead Gas Condensate If change of ownership give name and address of previous owner II. DESCRIPTION OF WELL AND LEASE Pool Name, Including Formation Kind of Lease State, **XXXXXXXX** State 13 Maljamar (G-SA) Location 1980 Feet From The South Line and 660' Unit Letter Feet From The East , Township 17-S Range 32-E County III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil 🗶 Address (Give address to which approved copy of this form is to be sent) Texas-New Mexico Pipe Line Company P. O. Box 1510, Midland, Texas Name of Authorized Transporter of Casinghead Gas 🔀 or Dry Gas Address (Give address to which approved copy of this form is to be sent) Phillips Petroleum Company Room B-2, Phillips Building, Odessa, Texas Unit Sec. Twp. Rge. Is gas actually connected? If well produces oil or liquids, give location of tanks. 18 17-S 33-E L Yes 5-5-59 If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA New Well Oil Well Gas Well Workover Plug Back | Same Res'v. Diff. Res'v. Designate Type of Completion -(X)X Date Spudded Date Compl. Ready to Prod. Total Depth ∍.**в**.т.<del>Б</del>. 4-13-59 5-5-59 4418 4405 Name of Producing Formation Pool Top Oil/Gas Pay Tubing Depth Andres Grayburg-San 4068' 4029 Maljamar Depth Casing S 4173'-79' 4068'-78 4152'-58', 4163'-69' 4192'-98', 4208'-14' 4415' 42191 TUBING, CASING, AND CEMENTING RECORD HOLE SIZE ASING & TUBING SIZE DEPTH SET SACKS CEME <u> 171'</u> 12-1/4" 8-5/8" 150 sxs 4415 7-7/8" 5-1/2" 150 sxs & 1200 gals. Cealment 4029' 2-3/8" (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) V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL Date First New Oil Run To Tanks Producing Method (Flow, pump, gas lift, etc.) Date of Test Length of Test Tubing Pressure Casina Pressure Choke Size Actual Prod. During Test Oil-Bbls. Water-Bbls. Gas - MCF **GAS WELL** Actual Prod. Test-MCF/D Bbls. Condensate/MMCF Length of Test Gravity of Condensate Testing Method (pitot, back pr.) Tubing Pressure Casing Pressure Choke Size VI. CERTIFICATE OF COMPLIANCE OIL CONSERVATION COMMISSION 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 TITLE ZW. d. 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.

PETROLEUM ENGINEER

November 10, 1965

(Title)

(Date)

Fill out Sections I, II, III, and VI only 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

able on new and recompleted wells.

All sections of this form must be filled out completely for allow-