· · · · · · · · · · · · · · · · · · ·		οž.		
			110.	
DISTRIBUTION	NEW MEXICO OIL C	CONSERVATION COMMISSION	HOBBS OFFErmig-104	
SANTA FE		FOR ALLOWADLE	Superseues Marc-104 and C-11	
File		AND F	$EB 26 2^{\text{Effective 1-1-65}}$	
U.S.G.S.	AUTHORIZATION TO TRA	ANSPORT OIL AND NATURA	AL GAS < 05 PH VER	
LAND OFFICE			iii uj	
TRANSPORTER OIL				
GAS				
OPERATOR				
PRORATION OFFICE				
Chercher .			· · · · · · · · · · · · · · · · · · ·	
Jan american	Hetroleum Co	2p.		
Autres 1051		210		
1001 08 HOD	WS 1 0 88.	240		
Reason(s) for filing (Check proper b	ox) (0 /	Other (Please explain)		
New Well	Change in Transporter of:			
Recompletion	Oil Dry Ga	15		
Charge in Ownership	Casinghead Gas Conder	nsate		
If change of ownership give name				
and address of previous owner				
. DESCRIPTION OF WELL ANI				
Lease Name	Well No. Pool Na	me, Including Formation	Kind of Lease	
State C had	13 5 Bl	netres-Oil	State, Federal or Fee	
Location				
Unit Letter E : /4	180 Feet From The North Lin	and lalan	The Okeni	
, <u>, , , , , , , , , , , , , , , , , , </u>	700 reerrom the <u>Flock</u> Lin	ie and <u>0000</u> Feet Fi	rom The West	
Line of Section 36	Township 2/-5 Range 3	7-E , NMPM, C	Pear	
	tenning 2/ 3 frange 3		County County	
DESIGNATION OF TRANSPOL	RTER OF OIL AND NATURAL GA	S		
Name of Authorized Transporter of C	Dil 🔀 or Condensate	Address (Give address to which a	approved copy of this form is to be sent)	
Taging new menior	Dog P. Da	Paul 1710 Som in 1		
Nume of Authorized Transporter of C	Casir head Gds 🗙 cr Dry Gas 🦳	OO4 ISIO, IOLala	approved copy of this form is to be sent)	
Marine Dela		Address (Give underess to which a	pproved copy of this form is to be sent)	
- Murren Filola	ino corp	Bay 1197, Oun	ice, non	
If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected?	When	
give location of tanks.	D 36 21-5 37-E	Kyes	2-24-65	
	with that from any other lease or pool,	give commingling order number:		
. COMPLETION DATA	· · · · · · · · · · · · · · · · · · ·			
Designate Type of Complet	Oil Well Gas Well	New Well Workover Deeper	n – Plug Back – Same Res 'v. Diff. Res 'v .	
			×	
Date Spudded OC	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
11-24-64	1-11-65	6585	6582'	
i'col	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
Slinetris	Blinetry	57/5	5942	
Perforations,			Depth Casing Shoe	
5715-30,5737-80,57	86-94,5800-10,5865-5900'		6585'	
, , , , , , , , , , , , , , , , , , , ,		CEMENTING RECORD		
HOLESIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
1711	133/8"	301	250	
12/41"	9 5/8 "	1410	700	
8 3/4"	7 "	6585	3500	
	2. "	5942		
TEST DATA AND PEOPEST			······································	
 TEST DATA AND REQUEST : OIL WELL 		fter recovery of total volume of load opth or be for full 24 hours)	d oil and must be equal to or exceed top allow	
Date First New Oil Bun To Tanks	Date of Test	Producing Method (Flow, pump, go	as lift. etc.)	
2.2415	7 75-15	I laur		
2-24-65 Length of Test	2-25-65 Tubing Pressure	Casing Pressure	Choke Size	
On Dance			Choke Size	
Actual Prod. During Test	<u>280</u>	520	20/64	
Autual Frou, During Lest		Water-Bbls.	Gas-MCF	
l	/5	12		
GAS WELL				
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size	
. CERTIFICATE OF COMPLIA	NCE	OIL CONSEE	RVATION COMMISSION	
I hereby certify that the rules and regulations of the Oil Conservation		APPROVED, 19		
Commission have been complied	with and that the information given		· -	
	he best of my knowledge and belief.	BY		
v -		TITLE		
		This form is to be filed	This form is to be filed in compliance with RULE 1104.	
		This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or a pened		
(Signature)		well, this form must be accompanied by a tabulation of the deviation		
Crea Superintenaint		tests taken on the well in accordance with RULE 111.		
	Title)	All sections of this form able on new and recomplete	n must be filled out completely for allow- d wells	
2-26-65	· · · · · · · · · · · · · · · · · · ·			
		Fill out Sections I, II,	III, and VI only for changes of owner,	