-NO. OF COPIES RECEIVED		i .	
DISTRIBUTION			
SANTA FE			
FILE			
u.s.g.s.			
LAND OFFICE		<u> </u>	
TRANSPORTER	OIL		
	GAS		
OPERATOR			

Form C-104			
Supersedes		and	C-116
T-6641 1			

4	DISTRIBUTION	HEW MEXICO OIL CONSERVATION ON STONCE C. C. C. Form C-104			
	SANTA FE	REQUEST F	Supersedes Old C-104 and C-110		
	FILE	KEQUEST 1		Effective 1-1-65	
			**************************************	M.266	
	U.S.G.S.	AUTHORIZATION TO TRAI	AUTHORIZATION TO TRANSPORT OIL AND NATURAL 18		
	LAND OFFICE				
	TRANSPORTER GAS				
	OPERATOR			÷	
1	PRORATION OFFICE				
	Operator			1	
	TOM SCHNEID	ER		* <b>a</b>	
Address 201 V& J Tower - Midland, Texas 79701					
	Reason(s) for filing (Check proper box)		Other (Please explain)		
	New Well	Change in Transporter of:			
	Recompletion	Oil Dry Gas	s		
	Change in Ownership	Casinghead Gas Condens	sate		
	If change of ownership give name and address of previous owner				
	•				
II.	DESCRIPTION OF WELL AND I	Lease No. Well No. Pool Nam	ne, Including Formation	Kind of Lease	
	Lease Name	_		State, Federal or Fee State	
	STATE	l Jalm	at (Yates)	State	
	Location				
	Unit Letter 0; 660	Feet From The SouthLine	e and 1980 Feet From	The East	
	Line of Section 16 Tow	nship 23 South Range 3	6 East , NMPM,	Lea County	
III.	DESIGNATION OF TRANSPORT	ER OF OIL AND NATURAL GA	s		
***	Name of Authorized Transporter of Oil	or Condensate	Address (Give address to which appr	oved copy of this form is to be sent)	
	Phallips of Il Paro		J. 7 - 200 (1100)		
	Name of Authorized Transporter of Cas.	inghead Gas or Dry Gas	Address (Give address to which appr	oved copy of this form is to be sent)	
		inglista das or or, or	or Odessa, Texas  Is gas actually connected? When		
	Phillips or The Phillips				
	If well produces oil or liquids,	Unit Sec. Twp. Rge.			
	give location of tanks.	0   16   23S 36E	No	Near Future	
	If this production is commingled with	h that from any other lease or pool.	give commingling order number:		
**/	COMPLETION DATA	if that from any other reaso or poor,	g		
IV.		Oil Well Gas Well	New Well Workover Deepen	Plug Back   Same Res'v. Diff. Res'v.	
	Designate Type of Completio	n = (X)	; x ;		
		Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
	Date Spudded		<u> </u>	3,2861	
	April 5, 1966	April 25, 1966	3,3001	Tubing Depth	
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	, ,	
	3.445' DF	Yates	3,080'	3,0601	
	Perforations			Depth Casing Shoe	
3080, 3087, 3104, 3110, 3126 3133, 3144, 3155,		3167	3,2991		
	J000; J001; J104; J110	TURING CASING AND	CEMENTING RECORD		
		CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
	HOLE SIZE		<del></del>	75	
	11"	8-5/8" 20# J-55	2291		
	7-7/8"	5-1/2" 15.5# J-55	3,299'	125	
		2-3/8" 4.7# J-55	3,060!		
		1-111			
V.	TEST DATA AND REQUEST FO	OR ALLOWABLE (Test must be a phile for this de	fter recovery of total volume of load of epth or be for full 24 hours)	il and must be equal to or exceed top allow-	
	OIL WELL		Producing Method (Flow, pump, gas	lift, etc.)	
	Date First New Oil Run To Tanks	Date of Test Producing Method (Flow, pump, gas tift, etc.)			
				Chaha Siza	
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
	Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	Gas-MCF	

GAS WELL				
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
390	24 hr.	-0-	-0-	
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size	
Ball Ball	60# - 270#	218#	2-3/8"	

APPROVED.

BY.

VI.	CERTIFICA	TE	OF	COMP	LIANCI
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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.

Bu Same				
(Signature)				
Owner				
(Title) May 6, 1966				

(Date)

TITLE .

This form is to be filed in compliance with RULE 1104.

OIL CONSERVATION COMMISSION

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.