DISTRIBUTION ANTA FE TILE J.S.G.S. 1.

NEW MEXICO OIL CONSERVATION COMP. ON REQUEST FOR ALLOWABLE AND

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

	LAND OFFICE			AOTHORIZATION TO TR	ANSFORTOL	L AND NATURAL	GAS		
	TRANSPORTER)IL	2						
	G	AS			RECEIVED				
	OPERATOR			~ E L E I V E L					
1. PRORATION OFFICE Operator									
	1	ODDO	רבייות עבו	V N	FEB 1 7 1978				
	PENROC OIL CO	ORPO	KATIO	N					
	P. O. Drawer	831	. Mid	land, Texas 79702	nd, Texas 79702				
	Reason(s) for filing (Che				Oth	er (Please explain)			
	New Well X Change in Transporter of:				CASINGHEAD GAS MUST NOT BE FLARED AFTER 4-2-28				
	Recompletion Oil Dry Ga				TELARED AFTER 4-2-18 UNLESS IN EXCEPTION TO Rede 306				
	Change in Ownership	<u> </u>		Casinghead Gas Conde	nsate U	NLESS IN EXC	EPTION TO Kule 306		
	If change of ownership	give	name		IS	OBTAINED 2-2			
	and address of previous	s own	er			Ext. 2-2			
II.	DESCRIPTION OF W	WELL	AND I	LEASE					
	Lease Name			Well No. Pool Name, Including F		Kind of Leas	e Lease N	io.	
	Elliott-Feder	ral		1-Y Linda San	Andres	State, Federa	d or Fee Federal LC-0681	27	
	Location						-		
Unit Letter M; 330 Feet From The South Line and 380 Feet From The Wos Line of Section 29 Township 6S Range 26E NMPM. Cha									
	Line of Section 2	23	10**	maint 62 Name	26E	, NMPM,	Chaves Coun	У	
III.				ER OF OIL AND NATURAL GA	NS				
	Name of Authorized Tran	nsporte	er of Oil	X or Condensate	Address (Give address to which approved copy of this form is to be sent)				
	Navajo Crude Oil Purchas				501 E. Main, Artesia, New Mexico 88210				
	Name of Authorized Tran	nsporte	er of Cas.	Inghead Gas or Dry Gas	Address (Give	address to which appro	ved copy of this form is to be sent)		
				11-11	112	117			
	If well produces oil or liquids, give location of tanks.			Unit Sec. Twp. Ege.	Is gas actually connected? Who		en.		
	If this production is co COMPLETION DATA		gled with	h that from any other lease or pool,	give commingl	ing order number:		_	
				Oil Well Gas Well	New Well V	orkover Deepen	Flug Back Same Resty. Diff. Re	s'v,	
ĺ	Designate Type o	of Cor	mpletio	n - (X)	x				
	Date Spudded			Date Compl. Ready to Prod.	Total Depth		P.B.T.D.		
	10/23/77			1/22/78		1095'	1052'		
	Elevations (DF, RKB, R) 3661.4 GR	T, GR,	, etc.,	Name of Producing Formation	Top Oil/Gas F		Tubing Depth		
	Perforations			San Andres		968'	983 Depth Casing Shoe		
		t shot	t each 2', 17 holes (.5'	')		John Grand Silve			
	TUBING, CASING, AND CEMENTING RECORD								
	HOLE SIZE			CASING & TUBING SIZE	DEPTH SET		SACKS CEMENT		
	12 1/4"			9 5/8"		450'	200		
	7 7/8			4 1/2		1085	175		
				2 3/8	 	983	 		
_ i					<u> </u>			لبهي	
V.	EST 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)								
i				Date of Test	Producing Met	nod (Flow, pump, gas li	(t, etc.) 10 5 15		
	1/22/78			1/30/78	Pump & Flow		J. J		
	Length of Test			Tubing Pressure	Casing Pressu		Choke Size		
	24 hrs			40# Oti-Bbis.	Water - Bbls.	35#	Open 2"		
	Actual Prod. During Test 25	ιτ		8	Wdiel - Bbis.	17	9		
ì					<u> </u>	<u> </u>			
	GAS WELL								
ſ	Actual Prod. Test-MCF	P	i	Length of Test	Bbls. Condens	ate/MMCF	Gravity of Condensate		
	Testing Method (pitot, bo	ack pr.	./	Tubing Pressure (shut-in)	Casing Pressu	re (Shut-in)	Choke Size		
L	· · · · · · · · · · · · · · · · · · ·			<u> </u>		<u> </u>			
VI.	CERTIFICATE OF COMPLIANCE					OIL CONSERVA	TION COMMISSION		
					APPROVED				
	Commission have been	plied wi	gulations of the Oil Conservation ith and that the information given	7.10					
ı	shove is true and com	to the	best of my knowledge and belief.						
					TITLE SUPERVISOR, DISTRICT II				
	<i>i</i> 0	1)	,					_	
	1 1 / X	7/.	e illo		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. 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.				
-		1.1	(Signat	unit)					
	10	Pr	reside						
-			(Tul						
_		Fε		y 16, 1978					
_			(Date						