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1	NO. OF COPIES RECE	IVED	5	
	DISTRIBUTION			
ţ	SANTA FE	E		
t	FILE		/	<u>L</u>
Ī	U.S.G.S.	<u> </u>	L	
Ī	LAND OFFICE			
Ì	TRANSPORTER	OIL	1	
		GAS	1	
1	OPERATOR			<u> </u>
	PRORATION OFFICE			<u> </u>
- (

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-104

DISTRIBUTION SANTA FE	NEW MEXICO OIL CON	OR ALLOWATED	51011	Supersedes Old C-104 and C-11 Effective 1-1-65	
FILE / V			ATUDAL 045		
U.\$.G.\$.	AUTHORIZATION TO TRAN	SPORT OIL AND N	ATURAL GAS		
AND OFFICE	M	IAR 3 1971			
OIL /					
TRANSPORTER GAS		C. C. C.			
OPERATOR /	o vii	IT. U. U. ITESIA, DFFICE			
PRORATION OFFICE		IILSIA, DFFIWE			
Dalport Oil Corpor	ation V				
Address		55000			
3471 First Natl Ba	nk Bldg . Dallas, Te	xas 75202	-1-2-1		
Reason(s) for filing (Check proper box)		011101 12		minghead Gas	
New Well	Change in Transporter of:	Connec	tion of Ce	asinghead Gas	
Recompletion	Oil Dry Gas	<u> - </u>			
Change in Ownership	Casinghead Gas Condens	ate			
f change of ownership give name					
nd address of previous owner					
	CASE			Lease No.	
DESCRIPTION OF WELL AND L	Well No. Pool Name, Including For	rmation	Kind of Lease		
Spurck-State	6 Double L Qu	ieen	State, 1000000		
Location / B 99() Fact From The Morth Line	1650	Feet From The	East	
Unit Letter ; 990	Feet From TheLine	dia			
26	mshin 14-8 Range	29-E , NMPN	. Chave	County	
Line of Section 36 Tow	rnship Range				
	OF OW AND MATURAL CA	s			
DESIGNATION OF TRANSPORT	rer of oil and natural gas	Address (Give address	to which approved c	opy of this form is to be sent)	
Name of Authorized Transporter of Oil	<u> </u>	Artonia.	Mew Mexico	88210	
Navajo Refining Co	o. Pipe Line Division	Address (Give address	to which approved o	copy of this form is to be sent)	
Name of Authorized Transporter of Cas	singhead Gas A of Dry Gas	Ash & Washi	naton Sts.	Odessa, Texas 797	
Phillips Petroleum	w combany	Is gas actually connec	ted? When		
If well produces oil or liquids,	Unit Sec. Twp. Rge.	1		FEB 26 19 71	
give location of tanks.	H 36 14-8 29-1				
q	at the lease or need	give commingling orde	er number:		
If this production is commingled wit	th that from any other lease or pool,			Date Date Diff Res	
COMPLETION DATA	Oil Well Gas Well	New Well Workover	Deepen Pl	ug Back Same Res'v. Diff. Res	
Designate Type of Completic		i	i I		
	Date Compl. Ready to Prod.	Total Depth	P	.B.T.D.	
Date Spudded	Date Compi. Head, to 100				
	Name of Producing Formation	Top Oil/Gas Pay	T	ubing Depth	
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	100 011,			
			D	epth Casing Shoe	
Perforations					
	TUBING, CASING, AN	D CEMENTING RECO	RU	SACKS CEMENT	
HOLE SIZE	CASING & TUBING SIZE	DEPTH	SET	SACKS CLIMETO	
ROLL SIZE					
		of an engagery of total vo	lume of load oil and	l must be equal to or exceed top a	
. TEST DATA AND REQUEST F	FOR ALLOWABLE (Test must be able for this d	lepth of be jor juli 24 no	(4) a /		
OIL WELL	Date of Test	Producing Method (F	ow, pump, gas lift,	etc.)	
Date First New Oil Run To Tanks	Dare of Leaf				
	The Property of the Property o	Casing Pressure		Choke Size	
Length of Test	Tubing Pressure		ĺ		
		Water - Bbls.		Gas - MCF	
Actual Prod. During Test	Oil-Bbls.	,,,,,,	ľ		
İ					
GAS WELL	_			Gravity of Condensate	
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/M	MCF	Gigatty of Couramedia	
Actual Plous 1001 1001					
m washed (since heat no)	Tubing Pressure (Shut-in)	Casing Pressure (S)	(at-su	Choke Size	
Testing Method (pitot, back pr.)					
			CONSERVAT	TON COMMISSION	
I. CERTIFICATE OF COMPLIA	NCE		Q\\Y_ D \Q_	10/1	
		APPROVED_	1115111 1/		
T homely certify that the rules an	eby certify that the rules and regulations of the Oil Conservation			ressett	
Commission have been complied	i with and that the information gives	BY (1, Lylessely			
above is true and complete to	the best of my knowledge and belief		OH AND DAR IN	PECTOR	
		TITLE			
•	()	PRI. 1 _ F 2	s to be filed in co	ompliance with RULE 1104.	
112	edate	This form i	sequent for allows	able for a newly drilled or deep	
$(11) \Psi = 0$	XV	_ If this is a	Lednest in Strong	ied by a tabulation of the devi	

11) & Tod	a de
(Signature) President	
(Title)	- FFE 23 07

(Date)

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.