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DISTRIBUTION	REQUEST F	NSERVATION COMMISSION OR ALLOWABLE AND	Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65
U.S.G.S.		SPORT OIL AND NATURAL GA	S
IRANSPORTER GAS		RE	ECEIVED
OPERATOR 3 PRORATION OFFICE			MAY 3 1 1967
Yates Petroleum Cor	poration V		C. C. C.
Address 309 Carper Building Reason(s) for filing (Check proper box New Well Recompletion Change in Ownership If change of ownership give name	Change in Transporter of:	CO 88210 Other (Please explain)	
and address of previous owner		· · · · · · · · · · · · · · · · · · ·	
. DESCRIPTION OF WELL AND Lease Name	Well No. Pool Nam	e, Including Formation	Kind of Lease State, Federal or Fee Fee
Gissler "AV"	2 Ea	gle Creek S. A.	
Unit Letter <u>B</u> ; <u>6</u>	60 Feet From The North Line	and 1980 Feet From T	he <u>East</u>
	wnship 17S Range 2	25E , NMPM, Eddy	County
. DESIGNATION OF TRANSPOR Name of Authorized Transporter of Oil	TER OF OIL AND NATURAL GA	S Address (Give address to which approv	ed copy of this form is to be sent)
The Permian Corporation   Name of Authorized Transporter of Casinghead Gas or Dry Gas		P. O. Box 3119 Midland, Texas Address (Give address to which approved copy of this form is to be sent)	
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. B 23 17 25	Is gas actually connected? Whe NO	n
If this production is commingled with COMPLETION DATA	ith that from any other lease or pool, a	give commingling order number:	
Designate Type of Completi	on $-(X)$ Oil Well Gas Well $X$	New Well Workover Deepen RE ENTRY	Plug Back Same Res'v. Diff. Res'v.
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
2-14-67	5-28-67	1600' (Cleaned Out) Top Oil/Gas Pay	1410' Tubing Depth
Eagle Creek S.A.	San Andres	1260	1350 Depth Casing Shoe
Perforations Open ho	le 1260-1410		1350
	TUBING, CASING, AND	DEPTH SET	SACKS CEMENT
HOLE SIZE	5 <sup>1</sup> / <sub>5</sub> "	1260	450 sx
	2"	1350'	
Y. TEST DATA AND REQUEST I	FOR ALLOWABLE (Test must be a	fter recovery of total volume of load oil	and must be equal to or exceed top allow-
OIL WELL Date First New Oil Run To Tanks	able for this de	pth or be for full 24 hours) Producing Method (Flow, pump, gas lij	
5-28-67	5-29-67	Pumping	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 Actual Prod. During Test	Oil-Bbls.	Water-Bbls. 30 Load Water	Gas-MCF TSTM
62	J2	Jo Toad Marei	
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
/1. CERTIFICATE OF COMPLIA	NCE	OIL CONSERVA	TION COMMISSION
I hereby certify that the rules and	d regulations of the Oil Conservation		130/, 19
Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		BY_W. a. Gressett	
/		TITLE	<u>494</u>
ML anustrong		This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepened	
(Signature)		well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.	
Agent (Trile)		All sections of this form must be filled out completely for allow-	
(Tile) 5-29-67(Date)		able on new and recompleted wells. 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	
		completed wells.	