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PRORATION OFFICE			

October 1, 1970 (Date)

NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE

Form C-104 Supersedes Old C-104 and C-110

FILE /		AND	Effective 1-1-65
U.S.G.S.	RECEIVED AUTHORIZATION TO TRA	NSPORT OIL AND NATURAL	GAS
LAND OFFICE	EED 2 /. 1071		
TRANSPORTER GAS	FEB 2 4 1971	(5)	
OPERATOR /	O. C. C.		
PRORATION OFFICE	ARTEGIA, OFFICE		
ROBERT H. BI	PROTELL		
Address			
	rtesia, New Mexico 88210	100 .00	
Reason(s) for filing (Check proper be		Other (Please explain)	
New Well Recompletion	Change in Transporter of: Oil Dry Ga	s	
Change in Ownership	Casinghead Gas Conden	sate	
VC 1 Company to a single print of the single p		at Antanta Nove Vore	ion
If change of ownership give name and address of previous owner	Archie M. S	peir, Artesia, New Mex	
DESCRIPTION OF WELL AND	D LEASE		
Lease Name	Well No. Pool Name, Including Fo	10. 4 5.3.	1 -
Harbold Federal	13 Empire Tates S	even Rivers State, Fede	ral or Fee Federal 1C050158
Location	and the second s	e and <u>2310</u> Feet From	n The West
Unit Letter :;	L650 Feet From The North Lin	e and reet ron	1110
Line of Section 35	Township 17 South Range 2	East , NMPM, Eddy	County
THE PROPERTY OF THE ANGRO	DEED OF OU AND NATURAL CA	.c	
Name of Authorized Transporter of C	RTER OF OIL AND NATURAL GA	Address (Give address to which app	roved copy of this form is to be sent)
Nevelo Refining Co	Pipe Line Bivision	N. Freeman, Artesia,	New Mexico
Name of Authorized Transporter of (Casinghead Gas or Dry Gas	Address (Give address to which app	roved copy of this form is to be sent)
non	Unit Sec. Twp. Ege.	Is gas actually connected?	Vhen .
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Ege.	is gas actually some	
	with that from any other lease or pool,	give commingling order number:	
COMPLETION DATA			Plug Back Same Resty. Diff. Rest
Designate Type of Comple	tion - (X)	New Well Workover Deepen	Plug Back Same Restv. Diff. Rest
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
210 00 2233			
Elevations (DF, RKB, RT, GR, etc.	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
Desforations			Depth Casing Shoe
Perforations			
	TUBING, CASING, AN	D CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
TEST DATA AND REQUEST	FOR ALLOWABLE (Test must be a	after recovery of total volume of load o epth or be for full 24 hours)	oil and must be equal to or exceed top allo
Oll WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas	lift, etc.)
Pare I Met Men Ou Man 10 Talles			
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
	Oil - Bbls.	Water - Bbls.	Gas - MCF
Actual Prod. During Test	O11 - DD15.		
		_ L	
GAS WELL		1911- Q. 1 27-19-	Gravity of Condensate
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
Contribution (hannel annue but)			
. CERTIFICATE OF COMPLI	ANCE	OIL CONSERVATION COMMISSION	
		APPROVED	. 19
a	nd regulations of the Oil Conservation d with and that the information given	2.1 Cl disease	
above is true and complete to	the best of my knowledge and belief.	BY	Y UNIV
		TITLE	
,	A. 1	This form is to be filed	in compliance with RULE 1104.
There of	bugherly		towable for a newly drilled or deeper
(5	Signaturg)	tests taken on the Well in ac	npanied by a tabulation of the deviate cordance with RULE 111.
Recretery		All sections of this form	must be filled out completely for all

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 multipl completed wells.