	NO. OF COPIES RECEIVED 5				
	DISTRIBUTION	NEW MEXICO OIL	CONSERVATION COMMISSION	Form C-104	
S.	ANTA FE	REQUEST	Γ FOR ALLOWABLE	Supersedes Old C-104 and C-1. Effective 1-1-65	
	ILE /-		AND		
	.s.g.s.	AUTHORIZATION TO TR	ANSPORT OIL AND NATURA	ALGAS CFIVED	
	AND OFFICE OIL /			KEGEIVES	
r	RANSPORTER GAS	CORRECT	ED O		
0	PERATOR 2		Ψ γ	yul 1 9 1965	
I. P	RORATION OFFICE			n. c. c.	
Ot	perator Claim Comple			arteria, defice	
Ac	ldress	te 011 Company V			
Re	<b>BOX 69 - Habb</b> eason(s) for filing (Check proper bo	os, New Mexico	Other (Please explain)		
Nε	ew Well	Change in Transporter of:	Change well	name from Magruder-	
Re	ecompletion	Oil Dry C	Gas 🔲 Federan No.	2 to Magruder "A" No. 2.	
CH	nange in Ownership	Casinghead Gas Cond	ensate		
	change of ownership give name I address of previous owner	Carper Brillin	go., Inc., Artesia,	New Mexico	
II. <u>Df</u>	ESCRIPTION OF WELL AND	LEASE		·	
Le	ease Name		Jame, Including Formation	Kind of Lease	
-	Magruder "A"	2 6	mire (Yates - 7 River	8) Sun Federal XXXIX Federal	
			ine and 990 Feet F		
	Unit Letter;65	Feet From The <b>South</b> L	ine andFeet F	From The	
	Line of Section 35 , To	ownship 17-8 Range	27-8 , NMPM,	Eddy County	
		RTER OF OIL AND NATURAL G	AS	approved copy of this form is to be sent)	
N	ame of Authorized Transporter of O	***			
N	Continental Pipe Line Company  Name of Authorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent)				
1	None		,		
16	well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected?	When	
	ve location of tanks.	P 35 178 27E	No		
If 1	this production is commingled w	with that from any other lease or poo	l, give commingling order number	:	
	OMPLETION DATA	Oil Well Gas Well	New Well Workover Deepe		
	Designate Type of Complet		New Well Workover Deepe	Find Stock Indine ites v. Fifth ites v	
D	ate Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
	•				
P	col	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
P	erforations			Depth Casing Shoe	
<u> </u>	TUBING, CASING, AND CEMENTING RECORD				
-	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
-	HOLL SIZE	CASING & TODING SIZE			
	EST DATA AND REQUEST 1	FOR ALLOWABLE (Test must be	after recovery of total volume of loa depth or be for full 24 hours)	nd oil and must be equal to or exceed top allow	
	IL WELL ate First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump,	gas lift, etc.)	
	die i nat new on itan 10 i ame	2410 01 103			
I.	ength of Test	Tubing Pressure	Casing Pressure	Choke Size	
A	ctual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF	
_					
-	AC WELL				
	AS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
^				-	
г	'esting Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size	
vi. C	CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION		

## VI.

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.

•	
Calkobertson	
(Signature)	
District Clerk	
July 1, 1965	

(Date)

OR AND SAL ISLPECTOR

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 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.

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