	NO. OF COPIES RECEIVED			
	DISTRIBUTION	NEW MEXICO OIL CO	SISERVATION COMMISSION	Form C-104
	SANTA FE	REQUEST F	FOR ALLOWABLE	Supersedes Old C-104 and C-110
ľ	FILE /-		AND	Effective 1-1-65
ł	U.S.G.S.		NSPORT OIL AND NATURAL G	٨٢
	LAND OFFICE	AUTHORIZATION TO TRAI	INSPORT OIL AND NATURAL G	A3
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	TRANSPORTER OIL		ρ	JUN 1 0 1965
	GAS			VER
	OPERATOR			· · · ·
I.	PRORATION OFFICE			JUNIO
<b>I</b> .	Operator			1965
	Archie M.	Chair		
	Address	operi		ARTESIA
				A, DFFID-
	P.O. Lraw Reason(s) for filing (Check proper box)	ler 40		*~ <i>E</i> ;
	Reason(s) for filing (Check proper box)		Other (Please explain)	
	New Well	Change in Transporter of:		
	Recompletion	Oil Dry Gas		
	Change in Ownership X	Casinghead Gas Condens	<sub>sate</sub> 🗍 🛛 Magruder F <del>eda</del>	oral
l				······································
	If change of ownership give name			
	and address of previous owner $G_{EI}$	ver Drilling Co.	uite 200 Carpor Bui	ling rtesig.
				New Mexico
п	DESCRIPTION OF WELL AND I	EASE		NOW MORICO
	Lease Name	Well No. Pool Nam	ne, Including Formation	Kind of Lease
				State, Federal or Fee
	Louth dea Lake Unit	Tract 4 9 Red-	Lake Graybure	Feaeral
	Location		• -	
	Unit Letter a ; 23	57 Feet From The South_Line	e and <u>1656</u> Feet From 7	The the state of t
	· · · · · · · · · · · · · · · · · · ·			
	Line of Section L T Tow	nship 'i 7 Range	, NMPM,	County
	Line of Section 55, Tow	nship 17 Range	- <del>27 , NMPM, EG</del>	ay
			~	
III.	<b>DESIGNATION OF TRANSPORT</b>	ER OF OIL AND NATURAL GAS	S	
	Name of Authorized Transporter of Oil		Address (Give address to which approx	ed copy of this form is to be sent)
	Continent	al Cil Co.	r.0. Box 410 Art	esia, New Mexico
	Name of Authorized Transporter of Cas		Address (Give address to which approx	ed copy of this form is to be sent)
		Petroleum	P.O. Box 6666 0d	essa, Texas
			Is gas actually connected?	
	If well produces oil or liquids,	Unit Sec. Twp. Rge.	-	
	give locat on of tanks.	1 35 17 27	Yes	N. A.
			-ing againgting order number	
	If this production is commingled wit	h that from any other lease or pool, i	give comminging order number.	
IV.	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.
	Designate Type of Completio		New Well Workover Deepen	
	Designate Type of Completio	$\mathbf{n} = (\mathbf{n})$		
		,	l i i i i i i i i i i i i i i i i i i i	
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
	Date Spud-led	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
		· · ·	-	
	Date Spudded	Date Compl. Ready to Prod. Name of Producing Formation	Total Depth Top Oil/Gas Pay	P.B.T.D. Tubing Depth
		· · ·	-	Tubing Depth
		· · ·	-	
	Pool	· · ·	-	Tubing Depth
	Pool	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
	Pool Perforations	Name of Producing Formation TUBING, CASING, AND	Top Oil/Gas Pay	Tubing Depth Depth Casing Shoe
	Pool	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
	Pool Perforations	Name of Producing Formation TUBING, CASING, AND	Top Oil/Gas Pay	Tubing Depth Depth Casing Shoe
	Pool Perforations	Name of Producing Formation TUBING, CASING, AND	Top Oil/Gas Pay	Tubing Depth Depth Casing Shoe
	Pool Perforations	Name of Producing Formation TUBING, CASING, AND	Top Oil/Gas Pay	Tubing Depth Depth Casing Shoe
	Pool Perforations	Name of Producing Formation TUBING, CASING, AND	Top Oil/Gas Pay	Tubing Depth Depth Casing Shoe
	Pool Perforations HOLE SIZE	Name of Producing Formation TUBING, CASING, AND CASING & TUBING SIZE	Top Oil/Gas Pay O CEMENTING RECORD DEPTH SET	Tubing Depth Depth Casing Shoe SACKS CEMENT
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V.	Perforations HOLE SIZE TEST DATA AND REQUEST FO	Name of Producing Formation TUBING, CASING, AND CASING & TUBING SIZE DR ALLOWABLE (Test must be aj able for this de	Top Oil/Gas Pay CEMENTING RECORD DEPTH SET fter recovery of total volume of load oil pth or be for full 24 hours)	Tubing Depth Depth Casing Shoe SACKS CEMENT and must be equal to or exceed top allow-
v.	Perforations HOLE SIZE TEST DATA AND REQUEST FO	Name of Producing Formation TUBING, CASING, AND CASING & TUBING SIZE DR ALLOWABLE (Test must be at	Top Oil/Gas Pay CEMENTING RECORD DEPTH SET fter recovery of total volume of load oil	Tubing Depth Depth Casing Shoe SACKS CEMENT and must be equal to or exceed top allow-
v.	Perforations HOLE SIZE TEST DATA AND REQUEST FO	Name of Producing Formation TUBING, CASING, AND CASING & TUBING SIZE DR ALLOWABLE (Test must be aj able for this de	Top Oil/Gas Pay CEMENTING RECORD DEPTH SET fter recovery of total volume of load oil pth or be for full 24 hours) Producing Method (Flow, pump, gas li	Tubing Depth Depth Casing Shoe SACKS CEMENT and must be equal to or exceed top allow- ft, etc.)
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v.	Pool Perforations HOLE SIZE HOLE SIZE Date Size Date First New Cil Run To Tanks Length of Test Actual Prod. During Test GAS WELL Actual Prod. Test-MCF/D	Name of Producing Formation         TUBING, CASING, AND         CASING & TUBING SIZE         OR ALLOWABLE         (Test must be aj able for this de         Date of Test         Tubing Pressure         Oil-Bbls.         Length of Test	Top Oil/Gas Pay         D CEMENTING RECORD         DEPTH SET         fter recovery of total volume of load oil         ph or be for full 24 hours)         Producing Method (Flow, pump, gas li         Casing Pressure         Water-Bbls.         Bbls, Condensate/MMCF	Tubing Depth Depth Casing Shoe SACKS CEMENT and must be equal to or exceed top allow- ft, etc.) Choke Size Gas-MCF
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	Pool Perforations HOLE SIZE HOLE SIZE TEST DATA AND REQUEST FOOL WELL Date First New Oil Run To Tanks Length of Test Actual Prod. During Test GAS WELL Actual Prod. Test-MCF/D Testing Method (pitot, back pr.) CERTIFICATE OF COMPLIANCE I hereby certify that the rules and to Commission have been complied v above is true and complete to the Machie Machine (Sign	Name of Producing Formation         TUBING, CASING, AND         CASING & TUBING SIZE         CASING & TUBING SIZE         DR ALLOWABLE (Test must be a) able for this de able for this de         Date of Test         Tubing Pressure         Oil-Bbls.         Length of Test         Tubing Pressure         CE         regulations of the Oil Conservation with and that the information given e best of my knowledge and belief.	Top Oil/Gas Pay         DEPTH SET         DEPTH SET         fter recovery of total volume of load oil         pth or be for full 24 hows)         Producing Method (Flow, pump, gas li         Casing Pressure         Water-Bbls.         Bbls. Condensate/MMCF         Casing Pressure         OIL CONSERVA         APPROVED         JEME MARK MACF         TITLE         Mil AME MARK         This form is to be filed in         If this is a request for allow         well, this form must be accompates         tests taken on the well in accompates	Tubing Depth         Depth Casing Shoe         SACKS CEMENT         and must be equal to or exceed top allow-         ft, etc.)         Choke Size         Gas-MCF         Gravity of Condensate         Choke Size         TION_COMMISSION         111.
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	Pool Perforations HOLE SIZE HOLE SIZE TEST DATA AND REQUEST FOOIL WELL Date First New Oil Run To Tanks Length of Test Actual Prod. During Test GAS WELL Actual Prod. Test-MCF/D Testing Method (pitot, back pr.) CERTIFICATE OF COMPLIANC I hereby certify that the rules and to Commission have been complied v above is true and complete to the Machie Machie (Sign Unit Open	Name of Producing Formation         TUBING, CASING, AND         CASING & TUBING SIZE         CASING & TUBING SIZE         DR ALLOWABLE (Test must be a) able for this de able for this de         Date of Test         Tubing Pressure         Oil-Bbls.         Length of Test         Tubing Pressure         CE         regulations of the Oil Conservation with and that the information given e best of my knowledge and belief.	Top Oil/Gas Pay         DEPTH SET         DEPTH SET         fter recovery of total volume of load oil         pth or be for full 24 hows)         Producing Method (Flow, pump, gas li         Casing Pressure         Water-Bbls.         Bbls. Condensate/MMCF         Casing Pressure         OIL CONSERVA         APPROVED         BY         MLL         TITLE         Casing form is to be filed in         If this is a request for allow         well, this form must be accompatests taken on the well in accompatests taken on the well in accompatest of this form must be accompatest to allow well in accompatest and the well i	Tubing Depth         Depth Casing Shoe         SACKS CEMENT         and must be equal to or exceed top allow-         ft, etc.)         Choke Size         Gas-MCF         Gravity of Condensate         Choke Size         TION-COMMISSION         110         19
	Pool Perforations HOLE SIZE HOLE SIZE TEST DATA AND REQUEST FOOIL WELL Date First New Oil Run To Tanks Length of Test Actual Prod. During Test GAS WELL Actual Prod. Test-MCF/D Testing Method (pitot, back pr.) CERTIFICATE OF COMPLIANC I hereby certify that the rules and to Commission have been complied v above is true and complete to the Machie Machie (Sign Unit Open	Name of Producing Formation         TUBING, CASING, AND         CASING & TUBING SIZE         OR ALLOWABLE         (Test must be a)         able for this de         Date of Test         Tubing Pressure         Oil-Bbls.         Length of Test         Tubing Pressure         CE         regulations of the Oil Conservation with and that the information given a best of my knowledge and belief.         Autor         Table         Oil - Bbls.	Top Oil/Gas Pay         DEPTH SET         DEPTH SET         fter recovery of total volume of load oil         pth or be for full 24 hours)         Producing Method (Flow, pump, gas li         Casing Pressure         Water - Bbls.         Bbls. Condensate/MMCF         Casing Pressure         OIL CONSERVA         APPROVED         BY         ML         TITLE         Mail BAIS MAR         This form is to be filed in         If this is a request for allow         well, this form must be accompated tests taken on the well in accompated the secompated well, this form must be for allow         All sections of this form must be accompated well on new and recompleted well         Fill out Sections I. II. III	Tubing Depth         Depth Casing Shoe         SACKS CEMENT         and must be equal to or exceed top allow-         ft, etc.)         Choke Size         Gas-MCF         Gravity of Condensate         Choke Size         TION-COMMISSION         11         19

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.