NO. OF COPIES RECEIVED		-	ı
DISTRIBUTION SANTA FE	NEW MEXICO O	Form C-104 Supersedes Old C-104 and C	
U.S.G.S.	AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS		
LAND OFFICE		AND THE AID TAIL AND	AL GAS
TRANSPORTER GAS		L. L.	
OPERATOR 3			RECEIVED
Operator	and discoll		
Address	and Wigsell		AUG 2 0 1965
Reason(s) for filing (Check prope	Box 868, Midland, Te		
New Well	Change in Transporter of:	Other (Please explain)	artebia, office
Recompletion Change in Ownership		y Gas Ondensate	
If change of ownership give na and address of previous owner I. DESCRIPTION OF WELL A Lease Name	ND LEASE Well No. Pool	d H. Brace Wigzell, Nume, Including Formation	Box 868, Midland, Texa
N. G. Phillips -	State 3 A	rtesia - Grayburg	State, Federal or Fee State
Unit Letter	330 Feet From The South	Line and 330 Feet Fr	rom The Bast
Line of Section 27	, Township 178 Range		
——————————————————————————————————————			Eddy County
Name of Authorized Transporter of	ORTER OF OIL AND NATURAL of Cil graph or Condensate		oproved copy of this form is to be sent)
Continental Pipe Name of Authorized Transporter of	Line Co.	Box 410. Artesia.	New Martico
Phillips Petrole		Address (Give address to which appeared to the Address to the Addre	oproved copy of this form is to be sent)
If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected?	When
give location of tanks.		Se Yes	10-7-60
COMPLETION DATA	d with that from any other lease or po		PC-156
Designate Type of Comp.	letion - (X)	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v
Date Spud led	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
8-24-60 Pool	Name of Producing Formation	Z133 Top Oil/Gas Pay	2122* Tubing Depth
Artesia	Grayburg	20821	2095 ·
Perforations 2082! - 2092!			Depth Casing Shoe
2003: - 2033:		AND CEMENTING RECORD	2122'
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
10* 8*	8 5/8* 5 1/2*	5011	50
	2 "	2122*	135
TEST DATE AND DESCRIPTION			
TEST DATA AND REQUEST OIL WELL	able for this	e after recovery of total volume of load depth or be for full 24 hours)	oil and must be equal to or exceed top allow
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas	s lift, etc.)
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas - MCF
GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bhls Condonagt A4 (C)	
		Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)			
	Tubing Pressure	Casing Pressure	Choke Size

III.

IV.

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.

Production Superintendent

August 11, 1965

(Date)

MAL AND CAR INSPECTOR TITLE

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.