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August 11, 1965 (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	
			AND	- 1 -	
	U.S.G.S.	AUTHORIZATION TO TRA	ANSPORT OIL AND NATURAL	GAS	
	LAND OFFICE		, · •		
	I DANISBORTED OIL		·**		
	TRANSPORTER GAS /				
			•	RECEIVED	
	OPERATOR				
I.	PRORATION OFFICE				
	Operator	,/		AUG 2 0 1965	
	Castle and Wi	gzell		A00 2 0 2500	
	Address	. 3			
				C. C. C.	
	P. O. Box 868	, Midland, Toxas		ARTESIA, OFFICE	
	Reason(s) for filing (Check proper be	ox)	Other (Please explain)		
	New Well	Change in Transporter of:			
	Recompletion.	Oil Dry G	rie -		
			<del></del>		
	Change in Ownership	Casinghead Gas Conde	ensate		
	If change of ownership give name	Zoho D. Chable and	TI Dames Wisemall T	Are IAM DAD word A	
	and address of previous owner	JOUR P. CARLTA SUG	H. DEGCE MIGNETIA	O. Box 848, Midland,	
				Texas.	
II.	DESCRIPTION OF WELL AND				
	Lease Name	Well No. Pool No	ame, Including Formation	Kind of Lease	
	Delhi & State "D"	Tenso 2 Red	Lake - Grayburg	State, Federal or Fee State	
	Location	LEGSE A KEU	mayer - grathera	96900	
	Location				
	Unit Letter M ;	90 Feet From The West Lin	ne and 330 Feet From	The South	
	,	1,50			
			<b></b>	en 5 S	
	Line of Section 28 , T	ownship 15 Range	28 E , NMPM,	Eddy County	
III.	DESIGNATION OF TRANSPO	RTER OF OIL AND NATURAL GA	AS		
	Name of Authorized Transporter of C			oved copy of this form is to be sent)	
	Traine of Trainers				
	The Permian Corpor	ration	Box 3119, Midland,	Texas	
	Name of Authorized Transporter of C	asinghead Gas 🔣 💮 or Dry Gas 🗀	Address (Give address to which appr	oved copy of this form is to be sent)	
			Durant 3 a mark 3 3 a	-1	
	Phillips Petroleur	a Company	Bartlesville, Okla		
	If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected?	hen	
	give location of tanks.	M 28 17s 28 E	Yes	12-14-61	
		M : 40 1.75 40 B	188	TEWTAWOT	
	If this production is commingled v	vith that from any other lease or pool,	give commingling order number:		
IV.	COMPLETION DATA		_		
		Oil Well Gas Well	New Well Workover Deepen	Plug Back   Same Res'v. Diff. Res'v.	
	Designate Type of Complet	$x_{ion} = (X)$		i l	
		X			
	Date Spud-led	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
	# 00 CI	7 00 61	60404	1976'	
	5-29-61	7-28-61  Name of Producing Formation	6048 Top Oil/Gas Pay		
	Pool	Name of Producing Formation	Top On/Gas Pay	Tubing Depth	
	Red Lake	Grayburg	1932•	1926*	
	Perforations			Depth Casing Shoe	
	1932-1944			1995'	
		TUBING, CASING, AN	D CEMENTING RECORD		
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
			·		
	11"	8 5/8"	612'	165	
	7 7/8"	4 1/2•	19951	100	
		2 *	1926		
V.	TEST DATA AND REQUEST	FOR ALLOWABLE (Test must be a	after recovery of total volume of load oi	l and must be equal to or exceed top allow-	
	OIL WELL	able for this d	epth or be for full 24 hours)		
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas	lift, etc.)	
			Continue	Chales Circ	
	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	Bbls. Condensate/MMCF	Gravity of Condensate	
		,			
	Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size	
			<del> </del>	<u> </u>	
VI.	CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION		
			APPROVED AUG 2 7 1965		
	I hereby certify that the rules and regulations of the Oil Conservation		APPROVED AUG 2 1303 , 19		
	Commission have been complied with and that the information given		mt / milkou m		
	above is true and complete to the best of my knowledge and belief.		BY /// a www.u.g		
				antes a	
	$\sim$		TITLE	State Control	
			months from the fit of the	is to be filed in compliance with RULE 1104.	
			I I	<del>-</del>	
	1/11/obsts		If this is a request for allo	If this is a request for allowable for a newly drilled or deepened	
	(Si <sub>t</sub>	gnature)	well, this form must be accomp	anied by a tabulation of the deviation	
	Bundayah I am Barrer	nd sala an damb	tests taken on the well in acc		
		ritle)		ust be filled out completely for allow-	
	Production Superintendent		able on new and recompleted wells.		

 $\,$  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.