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LAND OFFICE			
TRANSPORTER	OIL	1	
	GAS	/	
OPERATOR		2	
PRORATION OFFICE			
Operator			

August 11, 1965

(Date)

SANTA FE /-	REQUEST	NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE AND		
LAND OFFICE TRANSPORTER OIL / GAS / OPERATOR	AUTHORIZATION TO TR	ANSPORT OIL AND NATURA	RECEIVED	
PRORATION OFFICE Operator			AUG 2 0 1965	
	d Wigzell		O. C. C.	
Address P. C. Box			ARTEBIA, DEFICE	
Reason(s) for filing (Check proper	box)	Other (Please explain)		
New Well Recompletion	Change in Transporter of: Oil Dry G	αs		
Change in Ownership	Casinghead Gas Conde			
If change of ownership give name and address of previous owner		. B. Wigsell, Box	868, Midland, Texas	
II. DESCRIPTION OF WELL A		ame, Including Formation	Kind of Lease	
State	2 Art	esia - Grayburg	State, Federal or Fee State	
Location	23.6		•	
Unit Letter 0; 2	310 Feet From The Bast Lin	ne and 990 Feet Fr	om The South	
Line of Section 35	Township 17 8 Range	28 3 , NMPM,	Eddy County	
III. DESIGNATION OF TRANSP	ORTER OF OIL AND NATURAL GA	Address (Give address to which ap	proved copy of this form is to be sent)	
Continental Pi	Continental Pipe Line Co. Name of Authorized Transporter of Casinghead Gas K or Dry Gas Address (Give address to wh		Box 410, Artesia, New Mexico ve address to which approved copy of this form is to be sent)	
If well produces oil or liquids,	Unit Sec. Twp. Rge.	Bartlesville, Okl. Is gas actually connected?	When	
give location of tanks.	0 35 175 286	Yes	9-1-60	
If this production is commingled COMPLETION DATA	with that from any other lease or pool,	-		
Designate Type of Compl	etion - (X)	New Well Workover Deepen	Plug Back Same Restv. Diff. Restv	
Date Spud led	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
Pool 11-17-56	Name of Producing Formation	2535 Top Oil/Gas Pay	2522 Tubing Depth	
Artesia	Grayburg	2470	2446*	
Perforations	24061 25001	02004	Depth Casing Shoe	
2470' - 76'	7 2496' - 2500';	2508 - 2512 D CEMENTING RECORD	25221	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
11*	8 5/8*	547'	100	
8•	4 1/2"	25391	100	
	2 3/8"	2446'		
V. TEST DATA AND REQUEST OIL WELL	able for this de	ifter recovery of total volume of load epth 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	tift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
Actual Prod. During Test	Oil-Bbls.	Water-Bbis.	Gas - MCF	
GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
			diavity of condensate	
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size	
VI. CERTIFICATE OF COMPLI	ANCE	OIL CONSERVATION COMMISSION		
I hereby certify that the rules a	nd regulations of the Oil Conservation	APPROVED AUG 2	<u> </u>	
Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		BY MLamistrong		
		TITLE COL SER DAS	HENPERTON	
. /.		11102	V	
MIKA	auto	1	n compliance with RULE 1104. lowable for a newly drilled or deepened	
(5	Signature)	well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.		
Production	Superintendent (Title)		must be filled out completely for allow-	

 $\,$ All sections of this form must be filled out completely for allowable on new and recompleted wells.

 $\label{eq:Fillows} \begin{tabular}{ll} Fill out Sections I, II, III, and VI only for changes of owner, well name or number, or transporter, or other such change of condition. \end{tabular}$

Separate Forms C--104 must be filed for each pool in multiply completed wells.