| | · · · · · · · · · · · · · · · · · · · | | |
|--|---|---|---|
| 1 1 1 1 | NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GA | | Form C-164 Supersedes Old C-164 and C-11 Effective 1-1-65 |
| IRA WOMER OIL | | | . GAS |
| I PROVATION OFFICE | | | |
| | ll | MAR 5 1974 | |
| <u></u> | | | |
| (Check proper filing (Check proper | | Other (Please explain) | |
| New Well Necomy letion | Change in Transporter of: Cil Dry Go Casinghead Gas Conder | | ame & Well No. |
| If change of ownership give nam and address of previous owner_ | ne | | |
| II. DESCRIPTION OF WELL A | ND LEASE | | |
| Lesse Name Northwest Artesia | Well No. Pool Name, Including F Unit 5 Artesia Ouee | ormation Kind of Lev n Grayburg SA State, Fede | Ecaberite |
| Location | 1980 Feet From The North Lir | | |
| Lange defertion 32 | Township 17 Range | 28 , ммрм, | Eddy County |
| III. DESIGNATION OF TRANSP | ORTER OF OIL AND NATURAL GA | Address (Give address to which app | roved copy of this form is to be sent) |
| | <u>mpany, Pipe Line Divisio</u> (Casinghead Gas 🖾 or Dry Gas 🚍 | | |
| Phillips Petroleum | Company | Odessa, Texas | |
| It well produces oil or liquids, juve location of tanks. | Unit Sec. Twp. Rge. H 32 17 28 | is gas actually connected? | When 2-10-52 |
| IV. COMPLETION DATA Designate Type of Compl Date Spudged | etion - (X) Oil Well Gas Well Date Compl. Ready to Prod. | New Weli Workover Deepen Total Depth | Plug Back Same Res'v. Diff. Res'v |
| Elevations (DF, RKB, RT, GR, et | c., Name of Producing Formation | Top Oil/Gas Pay | Tubing Depth |
| Perforations | <u> </u> | | Depth Casing Shoe |
| HOLE SIZE | TUBING, CASING, AN | D CEMENTING RECORD | SACKS CEMENT |
| | | | SACKS CEMENT |
| · | · · · · · · · · · · · · · · · · · · · | | |
| V. TEST DATA AND REQUEST OIL WELL | FFOR ALLOWABLE (Test must be a able for this de | fter recovery of total volume of load o pth or be for full 24 hours) | il and must be equal to or exceed top allou |
| Date First New Oil Run To Tanks | Date of Test | Producing Method (Flow, pump, gas | lift, etc.) |
| Length of Test | Tubing Pressure | Casing Pressure | Choke Size |
| Actual Prod. During Test | Oil-Bbls. | Water - Bbls. | Gas - MCF |
| GASWELL | | ······································ | |
| Actual Proa. Test-MCF/D | Length of Test | Bbls. Condensate/MMCF | Gravity of Condensate |
| Teating Methica (pitot, back pr.) | Tubing Pressure (Shut-in) | Casing Pressure (Shut-in) | Choke Size |
| VI. CERTIFICATE OF COMPLI | ANCE | OIL CONSERV MAR 19 | ATION COMMISSION |
| 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. | | APPROVED, 19 | |
| | | | |
| - the har year | D. R. Mason | If this is a request for all | n compliance with RULE 1104. owable for a newly drilled or deepened panied by a tabulation of the deviatior |
| Chief Productio | on Clerk | tests taken on the well in acc | |
| (Title) 3-14-74 | | able on new and recompleted | |
| | {Date) | well name or number, or transp | orter, or other such change of condition. ust be filed for each pool in multiply |