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SANTA FE		NEW MEXICO OIL CONSERVATION COMMISSION Form C-104 REQUEST FOR ALLOWABLE Supersedes Old C-104 and C-11							
FILE /-									
U.S.G.S.	AUTHORIZATION TO TRA	AND THORIZATION TO TRANSPORT OIL AND NATURAL CAS							
LAND OFFICE		\land	LEIVED						
TRANSPORTER GAS		P							
			OCT 1 1 1965						
Operator Operator			D. C. C.						
Tenneco Oil Company		·	ARTESIA, OFFICE						
P.O. Box 1031, Mid	land. Texas								
Reason(s) for filing (Check proper bo		Other (Please explain)]						
New Well	Change in Transporter of: Oil Dry Go	s Change name of lease from Federal Hagerty NM 0610							
Hecompletion Change in Ownership	Casinghead Gas Conde								
and address of previous owner	Leonard Oil Company, 10t	h Floor Security Life B	ldg.,Roswell, New Mexico						
I. DESCRIPTION OF WELL AND	LEASE								
Leape Name	Well No. Pool No	me, Including Formation	Kind of Lease						
Hagerty Federal	12 H	enshaw Grayburg West	State, Federal or Fee Federal						
	60 Feet From The north Lir	ne and 1980 Feet From	The east						
Line of Section 18 , To	ownship 16S Range	<u>30e</u> , <u>NMPM</u> ,	Eddy County						
. DESIGNATION OF TRANSPOR	RTER OF OIL AND NATURAL GA	S							
Name of Authorized Transporter of O			oved copy of this form is to be sent)						
Continental Pipe Lin Name of Authorized Transporter of Co		Address (Give address to which appr	ng, Artesia, New Mexico oved copy of this form is to be sent;						
Skelly Oil Company		P.O. Box 1650 Tul							
If well produces oil or liquids,	Unit Sec. Twp. Rge.	10 gao	Then The						
give location of tanks.	0 18 165 30 E	yes	7-1969						
If this production is commingled w COMPLETION DATA	rith that from any other lease or pool,	give commingling order number:							
Designate Type of Completi	ion - (X)	New Well Workover Deepen	Plug Back Same Restv. Diff. Restv.						
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.5.T.D.						
Dute Spinded									
Pool	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth						
Periorations			Depth Casing Shoe						
	TUBING, CASINC AN CASING & TUBING SIZE	D CEMENTING RECORD	SACKS CEMENT						
HOLE SIZE	CASING & TUBING SIZE								
	EOD ALLOWARTE (Test must be a	fter recovery of total volume of load of	il and must be equal to or exceed top allou						
OIL WELL	able for this de	epth or be for full 24 hours)							
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas	<i>ujt, etc.)</i>						
Length of Test	Tubing Pressure	Casing Pressure	Choke Size						
			Gas-MCF						
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gds-ACF						
		<u></u>							
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						
I. CERTIFICATE OF COMPLIAN	NCE	OIL CONSERVATION COMM.SSION							
I have costify that the pulse and	I regulations of the Oil Conservation	APPROVED 0CT 1 1 1965							
Commission have been complied	with and that the information given ne best of my knowledge and belief.	BY ML amistr	ene						
above is true and complete to th	A .		$\overline{\mathcal{A}}$						
AOO		TITLE OR AND GAS INSPE C							
XKLOERA	R. L. Leggett	This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepend							
- I'V J A	mature)	well this form must be accomp	panied by a tabulation of the deviation						
District Office Superv		tests taken on the well in acc	ordance with RULE 111.						
/*1		All sections of this form n	oust be filled out completely for allow-						
October 1, 1965	ritle)	able on new and recompleted v	nust be filled out completely for allow- vells. I, and VI only for changes of owner.						

well	name or	number,	or tran	sporte	er, or	other	suc	in cha	uffe e	10	ondition.
	Separate	Forms	C-104	must	be	filed	for	each	pool	in	multiply
completed wells.											