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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

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I. Operator		JUN 19 1967	
Kennedy Oil Company, Inc.		D. C. C.	
Address		ARTESIA, OFFICE	
Box 151 - Artesia, New Mexico			
Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well	<input checked="" type="checkbox"/>	Change in Transporter of:	
Recompletion	<input type="checkbox"/>	Oil	<input type="checkbox"/>
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>
		Dry Gas	<input type="checkbox"/>
		Condensate	<input type="checkbox"/>

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease
Sheldon Federal	5	Square Lake	State, Federal or Fee Federal
Location			
Unit Letter	I	2310	Feet From The South Line and 660 Feet From The East
Line of Section	28	Township 16S	Range 31E, NMPM, County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil	<input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
Continental Pipe Line Company		Artesia, New Mexico	
Name of Authorized Transporter of Casinghead Gas	<input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
Phillips Petroleum Company		Bartlesville, Oklahoma	
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.
	G	28	16S
			Rge. 31E
			Is gas actually connected? Yes
			When Lease Comm. 1962

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen.	Plug Back	Same Res'v.	Diff. Res'v.
X			X					
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
7-15-61	4-19-67		3710'		3710'			
Pool	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
Square Lake	Grayburg		3472'		3618			
Perforations					Depth Casing Shoe			
Open Hole					3450			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
11"	8 5/8"		735'		250			
7 7/8"	5 1/2"		3450'		200			

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
6-13-67	6-14-67	Pump	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hours		15	
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
8	8	0	TSTM

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

VI. CERTIFICATE OF COMPLIANCE

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.

R. B. Kennedy
(Signature)

Vice President

(Title)

6-16-67

(Date)

OIL CONSERVATION COMMISSION

APPROVED JUN 19 1967, 19

BY W. A. Gressett
OIL AND GAS 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.