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TRANSPORTER	OIL	/		
	GAS			
OPERATOR		7		
PRORATION OFFICE				
Opposition				

## NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE

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

	U.S.G.S.  LAND OFFICE  OIL /	GAS					
	TRANSPORTER GAS OPERATOR	_	SEP 2 / 1971				
1.	PRORATION OFFICE						
	REMUDA OIL & GAS COMPANY						
	Address 150 Mid-Americ	a Bldg. Midland, Texa					
	Reason(s) for filing (Check proper box	Change in Transporter of:	Other (Please explain)				
	Recompletion Change in Ownership	Oil Dry Ga Casinghead Gas Conder	F= 1				
	If change of ownership give name and address of previous owner	Robert A. Dean -	823 Midland Tower -	Midland, Texas 79701			
II.	DESCRIPTION OF WELL AND Lease Name	LEASE Well No. Pool Name, Including Fo	ormation Kind of Lea	ase Lease No.			
	Bogle Location	1 West Mesa	Oueen Sant State, Fede	ral or Fee Fee			
	Unit Letter J; 19	80 Feet From The <b>East</b> Lin	e and <b>1980</b> Feet From	n The <b>South</b>			
	Line of Section 12 To	ownship 16-S Range	31-E , NMPM,	Eddy County			
II.	DESIGNATION OF TRANSPOR Name of Authorized Transporter of Oi	TER OF OIL AND NATURAL GA		roved copy of this form is to be sent)			
	'Name of Authorized Transporter of Ca		Address (Give address to which app	roved copy of this form is to be sent)			
	Phillips Petro	leum Co. Unit Sec. Twp. Rge.	Bartlesville, Okla Is gas actually connected?	homa Vhen			
	give location of tanks.		Yes	9-15-64			
	If this production is commingled war COMPLETION DATA	ith that from any other lease or pool,	give commingling order number:  New Well Workover Deepen	Plug Back   Same Res'v. Diff. Res'v.			
	Designate Type of Completi		t i i i i i i i i i i i i i i i i i i i	Triag Back Bank New V.			
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.			
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth			
	Perforations		Depth Casing Shoe				
			CEMENTING RECORD				
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT			
v.	TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a		il and must be equal to or exceed top allow-			
	OIL WELL Date First New Oil Run To Tanks	able for this de	pth or be for full 24 hours) 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			
	GAS WELL						
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate			
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size			
	I. CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION  APPROVED. SEP 27 1971				
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.		ax a Gressett					
C.J. Clamber			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.				
						(Signature) AGENT (Title)	
	9-22-71 (Date)						
						completed wells.	