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SANTA FE /	NEW MEXICO OIL CO	
	REQUEST F	
FILE /-	-	AND
U.S.G.S.	AUTHORIZATION TO TRAI	USPORT
LAND OFFICE		
TRANSPORTER GAS	_	
OPERATOR 3		₽
PRORATION OFFICE		1
Operator		
International Address	-Yates	
P. O. Box 427,	Artesia, New Mexico	- · ₁
New Well	Change in Transporter of:	`
= '		
Recompletion	Oil Dry Gas	<u> </u>
Change in Ownership	Casinghead Gas Condens	sate
DESCRIPTION OF WELL AND Lease Name State "A"	Well No. Pool Num 46 Emp:	ire Abo
Unit Letter B ;	990 Feet From The North Line	and 1
Line of Section 32 , To	ownship 17S Range	28E
Name of Futhorized Transporter of O		Address (C
The Permian Cor Name of Authorized Transporter of Co	asinghead Gas cr Dry Gas	P.O. Address (C
If well projuces oil or liquids,	Unit Sec. Twp. Rge.	Is gas acti
give location of tanks.	B 32 175 28E	
f this production is commingled w	with that from any other lease or pool, a	give comm
Designate Type of Complete		llew Well
Date Spud led	Date Compl. Ready to Prod.	Total Dept
Pocl	Name of Producing Formation	Top Oil/G
Perforations		
	THRING CASING AND	CEMENT
HOLE SIZE	TUBING, CASING, AND CASING & TUBING SIZE	CEMERI
HOLE SIZE	CASING & LOBING SIZE	
	FOR ALLOWABLE (Test must be af able for this de	
	FOR ALLOWABLE (Test must be af able for this deposit of Test)	
OIL WELL Date First New Oil Run To Tanks	able for this dep	Producing
OIL WELL	able for this dep	oth or be for
DIL WELL Date First New Oil Run To Tanks Length of Test	able for this dep	Producing Casing Pr
DIL WELL Date First New Oil Run To Tanks Length of Test Actual Prod. During Test	able for this dep	Producing Casing Pr
DIL WELL Date First New Oil Run To Tanks Length of Test Actual Prod. During Test GAS WELL	able for this dep Date of Test Tubing Pressure Oil-Bbls.	Producing Casing Pr Water-Bb
OIL WELL Date First New Oil Run To Tanks Length of Test Actual Prod. During Test	able for this dep	Producing Casing Pr
DIL WELL Date First New Oil Run To Tanks Length of Test Actual Prod. During Test GAS WELL	able for this dep Date of Test Tubing Pressure Oil-Bbls.	Producing Casing Pr Water-Bb
Length of Test Actual Prod. During Test GAS WELL Actual Prod. Test-MCF/D	able for this dep Date of Test Tubing Pressure Oil-Bbis. Length of Test Tubing Pressure	Producing Casing Pr Water-Bbl Bbls. Con
OIL WELL Date First New Oil Run To Tanks Length of Test Actual Prod. During Test GAS WELL Actual Prod. Test-MCF/D Testing Method (pitot, back pr.) CERTIFICATE OF COMPLIAN I hereby certify that the rules and Commission have been complied	Tubing Pressure Oil-Bbls. Length of Test Tubing Pressure Oil-Bbls. Length of Test Tubing Pressure Order this definition of the Oil Conservation with and that the information given	Producing Casing Pr Water-Bbl Bbls. Con
Date First New Oil Run To Tanks Length of Test Actual Prod. During Test GAS WELL Actual Prod. Test-MCF/D Testing Method (pitot, back pr.) CERTIFICATE OF COMPLIANT I hereby certify that the rules and Commission have been complied	able for this dep Date of Test Tubing Pressure Oil-Bbls. Length of Test Tubing Pressure NCE d regulations of the Oil Conservation	Producing Casing Pr Water-Bbl Bbls. Con Casing Pr

(Title)

September 17, 1965
(Date)

TION COMMISSION

SANTA FE /	REQUEST FOR ALLOWABLE New MEXICO OIL CONSERVATION COMMISSION Form C-104 Supersedes Old C-104 and C-		
FILE /-	AND Effective 1-1-65		
U.S.G.S.	AUTHORIZATION TO TRAI	NSPORT OIL AND NATURAL (GAS
LAND OFFICE			
TRANSPORTER GAS	_	ъс	O C I V W W
OPERATOR 3		\mathcal{C}	CEIVED
PRORATION OFFICE			
Cperator	17 . A	S	EP 2 0 1965
International Address	- Yates		0. C. C.
P. O. Box 427,	Artesia, New Mexico		TESIA. OFFICE
Reason(s) for filing (Check proper bo	(x)	Other (Please explain)	
New Well	Change in Transporter of:		1. 0++ 1.47
Recompletion Change in Ownership	Oil Dry Gas Casinghead Gas Condens	Change Lease	Name from State 647
		0004	ruman 7011
If change of ownership give name and address of previous owner			
DESCRIPTION OF WELL AND Lease Name		te, Including Formation	Kind of Lease
		•	State, Federal or FeeState
State "A"	46 Emp	ire Abo	State
Unit Letter B ;	990 Feet From The North Line	1900 Feet From 1900	The East
, <u> </u>			
Line of Section 32 , T	ownship 17S Range	28E , NMPM, Ede	dy County
DESIGNATION OF THE ANGRO	AMERICAN AND MARKINAL CA	α	
DESIGNATION OF TRANSPORM Name of Futhorized Transporter of C	RTER OF OIL AND NATURAL GA	Address (Give address to which appro	wed copy of this form is to be sent)
		P.O. Box 3119, Midla	nd. Toyas
The Permian Con Name of Authorized Transporter of Co	asinghead Gas or Dry Gas	Address (Give address to which appro	ved copy of this form is to be sent)
If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected? Wh	en
give location of tanks.	B 32 17S 28E	No :	insufficient volume
	vith that from any other lease or pool,	give commingling order number:	
COMPLE TION DATA		New Well Workover Deepen	Plug Back Same Restv. Diff. Rest
Designate Type of Complet	ion - (X)		
Date Spud led	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Pocl	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
Perforations			Depth Casing Shoe
	TUBING, CASING, AND	CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
TECT DATA AND REQUEST	EOD ALLOWADIE (Task much be et	for recovery of total volume of load oil	and must be equal to as exceed top allo
TEST DATA AND REQUEST OIL WELL	able for this de	pth or be for full 24 hours)	and must be equal to or exceed top allo
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas l	ift, etc.)
			Chalco Stra
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbis.	Water-Bbls.	Gas-MCF
100000			
·		<u> </u>	
GAS WELL			
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Togging Mathed (-last 1-1-1-1	Tubing Pressure	Casing Pressure	Choke Size
Testing Method (pitot, back pr.)	I uping Pressure	Cdsing Pressure	Choke Size
CERTIFICATE OF COMPLIA	NCE	OIL CONSERV	ATION COMMISSION
CERTIFICATE OF COMPLIA	HOE		
I hereby certify that the rules an	d regulations of the Oil Conservation	APPROVED SFP 2 0 19	
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given		BY W. a. Gresse	ett -
above is true and complete to	bove is true and complete to the best of my knowledge and belief.		
-		TITLE 62 APR 045 INSP	EU E' E
1/ 1/ -	1/	This form is to be filed in	compliance with RULE 1104.
Mauill E.	Michil	If this is a request for allo	wable for a newly drilled or deepen
(Si	gnature)	well, this form must be accomp- tests taken on the well in acco	anied by a tabulation of the deviation o
District Engin	307	1/4	

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.