DISTRIBUT:ON		13	
INTA FE		1	
ILE		ı	<u></u>
S.G.S.			
AND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR		1	
PRORATION OFFICE			

NEW MEXICO OIL CONSERVATION (AISSION REQUEST FOR ALLOWABLE AND

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

S.G.S.	AUTHORIZATION TO TRA	ANSPORT OIL AND NATURAL	CAS		
AND OFFICE	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS RECEIVED				
TRANSPORTER GAS					
OPERATOR	NOV - 3 1973				
Walsh and Watts, Inc.		O. C. C.			
	nita Falls, Texas 76301				
Reason(s) for filing (Check proper box		Other (Please explain)			
New Well Recompletion	Change in Transporter of: Oil Dry Ga	Water Injection	on Well		
Change in Ownership	Casinghead Gas Conden	Effective Oct	ober 1, 1973		
If change of ownership give name and address of previous owner	Shell Oil Company, F	P.O. Box 1509, Midlan	d, Texas 79701		
II. DESCRIPTION OF WELL AND	LEASE.				
North Square Lake Pr Unit	emier 14 Square Lake (i	Lease No. eral or Fee Federal L C-062483		
Unit Letter V 660	Feet From The South Lin	e andFeet From	n The West		
	wnship 16S Range	31E Edd	1		
	TER OF OIL AND NATURAL GA	Address (Give address to which app.	round conv of this form is to be contil		
WIW		Address (Give address to which app.			
	Unit Sec. Twp. Rge.		Vhen		
If well produces oil or liquids, give location of tanks.					
If this production is commingled with the completion DATA	th that from any other lease or pool,	give commingling order number: New Well Workover Deepen	Div Data Com Data Diff Data		
Designate Type of Completi		New West Workover Deepen	Plug Back Same Resty. Diff. Resty.		
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.)	Name of Froducing Formation	Tep Oil/Gas Pay	Tubing Depth		
Perforations			Depth Casing Shoe		
	TUBING, CASING, AND	CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
		1			
V. TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be as able for this de	fter recovery of total volume of load or pth or be for full 24 hours)	il and must be equal to or exceed top allow-		
Date First New Cil 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	Oli×Bo.s.	Water - Bbls.	Gas - MCF		
	The state of the s	:			
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 COMPLIAN	CE	OIL CONSERV	ATION COMMISSION		
			APPROVED JAN 14 1974 , 19		
Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		TITLE OIL AUD GAS INSPECTOR			
					This form is to be filed in compliance with RULE 1104.
	Alfred B. Guinn	If this is a request for allowell, this form must be accompant tests taken on the well in acc	owable for a newly drilled or deepened panied by a tabulation of the deviation ordence with RULE 111.		
Nice-President	tle)		nust be filled out completely for allow-		
November 5, 1973		Fill out only Sections I, II, III, and VI 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