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DISTRIBUTION			
SANTA FE		1	
FILE		1	سما
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	BTED OIL		
INANSFORTER	GAS		
OPERATOR		1	
BROBATION OF		1	

NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE AND

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

AUTHORIZATION TO TRANTO TO

EARD OFFICE	<u> </u>				
TRANSPORTER GAS	FEB 2 8 1973				
OPERATOR		- 20 2 8 19/3			
PRORATION OFFICE Operator		— 0. c. c.			
I -	im Corporation				
Address					
207 South 4th	Street - Artesia, NM				
Reason(s) for filing (Check proper bo	Change in Transporter of:	Other (Please explain)			
Recompletion	Oil Dry G	as To Transport	Casinghead Gas		
Change in Ownership	Casinghead Gas Conde	ensate			
If change of ownership give name and address of previous owner					
DESCRIPTION OF WELL AND					
Lease Name J Lazy J	Well No. Pool Name, Including F	Same Sadan	Lease No.		
Location	L4Eagle Cre	ek S.A.	Fee Fee		
Unit Letter I ; 165	O Feet From The South Lin	ne and 330 Feet From	The <u>Fast</u>		
Line of Section 22	ownship 17S Range	25E NMPM. Edd			
Line of Section 10	white 275 Ruige	25E , NMPM, Edd	V County		
	TER OF OIL AND NATURAL GA				
Name of Authorized Transporter of Oil Scurlock Oil Comp		Address (Give address to which approved copy of this form is to be sent)			
Name of Authorized Transporter of Co	singhead Gas C. or Dry Gas C.	1216 Vaughn BldgMidland, TX 79701 Address (Give address to which approved copy of this form is to be sent)			
Totale fetre	leum Corporation	207 Lo. 4th Street	Action 1m 88210		
If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected? Who	en Ton, III //Jul		
give location of tanks.	H 22 17S 25E	Yes	2-28.73		
If this production is commingled w: COMPLETION DATA	ith that from any other lease or pool,	give commingling order number:	· .		
Designate Type of Completi	on - (X)	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'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		
	TUBING, CASING, AN	D CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
TEST DATA AND REQUEST F		fter recovery of total volume of load oil	and must be equal to or exceed top allow-		
OIL WELL Date First New Oil Run To Tanks	Date of Test	pth or be for full 24 hours) Producing Method (Flow, pump, gas lif	t. etc.)		
!					
Length of Test	Tubing Pressure	Casing Pressure Choke Size			
Actual Prod. During Test	Oil-Bbls.	Water-Bbis.	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		
CERTIFICATE OF COMPLIAN	CE	OIL CONSERVA	TION COMMISSION		
		MAR 9 19	73		
Commission have been complied v	regulations of the Oil Conservation with and that the information given	ions of the Oil Conservation APPROVED , 19			
above is true and complete to the	: best of my knowledge and belief,				
Eddie hi	Lundil	This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepened			
(Signature) well, this form must be accompanied by a tabulation		nied by a tabulation of the deviation			
Eddie M. Manio	od - Engineer	tests taken on the well in accord	dance with RULE 111.		
(Tii 2-9-	· · · · · · · · · · · · · · · · · · ·	able on new and recompleted we	lle.		
(Date)		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