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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 TRANSPORT OIL AND NATURAL GAS

LAND OFFICE	RECEIVED		
TRANSPORTER GAS I			
OPERATOR I			
PRORATION OFFICE .			
Operator Dotroloum	. Corporation	C. C. C. RTESIA, OFFICE	
Yates Petroleum	(Colporation A	NIES/A, UFFICE	
207 South 4th S	Street-Artesia, LM 88	210	
Reason(s) for filing (Check proper box)		Other (Please explain)	
Jew Weil	Change in Transporter of:		- 1 1 - 3 - 6 - 6
Recompletion	Oil Dry Gas Castnahead Gas Condens		Casinghead Gas
hange in Ownership	Casinghead Gas Condens		
change of ownership give name			
nd address of previous owner			
ESCRIPTION OF WELL AND	LEASE	ematten Kind of Lease	Lease N
_ease Name	Well No. Pool Nume, meraning .		
Ingram Jackson BV	2 Eagle Creek	J.M.	
Location (5)	- North	990 Feet From 5	rhe West
Unit Letter 990	Feet From The 1.0rth Line	·	
Line of Section 26 Tox	wnship 175 Range 2	25E , NMPM, EC	dy Count
Line of Section			
ESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL GAS	Address (Give address to which appro-	ved copy of this form is to be sent)
Name of Authorized Transporter of Oil	or Condensate	1216 Vaughn Bldg.	-Midland, TX 79701
Scurlock Oil Comp Name of Authorized Transporter of Ca	etached Gas Tor Dry Gas	Address (Give address toywhich appro	yed copy of this form is to be sent)
Name of Authorized Transporter of Ca	eun Corporation	207 6. 4 1 2521-6	stress AM 17 Th
	Unit Sec. Twp. Age.	Is gas actually connected? Wh	
If well produces oil or liquids, give location of tanks.	D 26 17S 25E	Yes	2-28-73
Designate Type of Completi	on - (X) Gas Well Gas Well Date Compl. Ready to Prod.	New Well Workover Deepen Total Depth	Plug Back Same Res'v. Diff. Re
Date Spudded	Date Compi. Reday to Floar		5
Elevations (DF, RKB, RT, GR, etc.,	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
11022 3.23			
		fter recovery of total volume of load oi	and must be equal to or exceed top of
TEST DATA AND REQUEST I	FOR ALLOWABLE (Test must be a able for this de	pth or be for full 24 hours)	
Oll. WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas	lift, etc.)
			Choke Size
Length of Test	Tubing Pressure	Casing Pressure	
	0.0 75-1-	Water - Bbls.	Gas-MCF
Actual Prod. During Test	Oil-Bbls.		
GAS WELL			
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
		Casing Pressure (Shut-in)	Choke Size
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Singular)	5
		OIL CONSED	ATION COMMISSION
CERTIFICATE OF COMPLIA	NCE	11	
		" " SSSSVES	973
	d regulations of the Oil Conservation with and that the information given	(1) 0~	gressett
Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		DY	
	/	TITLE OIL AND GAS INSPE	CTOR
	halikeel	This form is to be filed in	n compliance with RULE 1104.
7 1, hi h	Malikeel	If this is a request for all	owable for a newly drilled or deep
		Collins of the collin	ted to a tabulation of the devi

(Signature)

Engineer Eddie H. Hahfood -

(Title) 2-9-73

(Date)

well, this form must be accompanied by a tabulation of the 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 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 completed wells.