	· · · · · · · · · · · · · · · · · · ·	NEW MEXICO OIL	NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE		Form C-104 Supersedes Old C-104 and C-1 Effective 1-1-65	
	G.S. DOFFICE	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS RECEIVED				
1	GAS 1 OPERATOR 1 PRORATION OFFICE Operator			APR 1	4 1976	
	-	eum Corporation 🖌			C. C.	
	Address   ARTESIA. OFFICE     207 South 4th Street-Artesia, NM 88210     Reason(s) for filing (Check proper box)     New Well   X     Change in Transporter of:     Recompletion   Oil     Dry Gas     Change in Ownership     Casinghead Gas					
	If change of ownership give name and address of previous owner					
11.	DESCRIPTION OF WELL AN	DLEASE				
	Lease Name Jackson "AT" Location	Well No. Pool Name, Including 8 Eagle Cre		Kind of Lease State, Federal or Fee	Lease No.	
	Unit Letter J ; 2	310 Feet From The South	ine and2310	Feet From The	last	
	Line of Section 14 7	Township 17S Range	25Е , ммрм,	Eddy	County	
III.	DESIGNATION OF TRANSPOR	RTER OF OIL AND NATURAL G	AS			
	Scurlock Oil Company Name of Authorized Transporter of Casinghead Gas X or Dry Gas Yates Petroleum Corp.		Address (Give address to which approved copy of this form is to be sent) 1216 Vaughn Bldg, Midland, TX 79701 Address (Give address to which approved copy of this form is to be sent)			
	If well produces cil or liquids, give location of tanks.	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$	1	, when	tesia, NM 88210 4-6-76	
IV.	If this production is commingled w COMPLETION DATA	with that from any other lease or pool	, give commingling order n			
	Designate Type of Complet	ion - (X) Oil Well Gas Well X	New Well Workover	Deepen Plug Bac	ck Same Res'v. Diff. Res'v.	
	Date Spudded 3-16-76	Date Compl. Ready to Prod.	Total Depth	P.B.T.D	·····	
	Elevations (DF, RKB, RT, GR, etc.) 3487 GR	4-6-76 Name of Producing Formation San Andres	1500' Top Oil/Gas Pay	Oil/Gas Pay Tubing Depth		
	Perforations 1334-1425 '			Depth Co	1713' Depth Casing Shoe 1466'	
┟			D CEMENTING RECORD			
ł	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		SACKS CEMENT	
	912"	7"	<u> </u>	1	25	
-	614"	$4^{1}_{5\&5^{1}_{5}''}$ 2-3/8"	1466 '		30	
	TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a	1317 *	of load oil and must be	equal to or exceed top allow-	
	OII. WELL able for this de   Date First New Oil Run To Tanks Date of Test   4-6-76 4-9-76		p:h or be for full 24 hours) Producing Method (Flow, pump, gas lift, etc.) Pumping			
F	Length of Test 24	Tubing Pressure	Casing Pressure	Choke Siz	Choke Size	
f	Actual Prod. During Test 45.6	он-выа. 28.0	Water-Bbis. 17.6 BLW	Gas - MCF	9.1	
-						
	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensats/MMCF	Gravity of	f Condensate	
$\left  \right $	Testing Method (pitot, back pr.)	Tubin_ Pressur^ (Shut-in )	Casing Pressure (Shut-in	) Choke Siz	:•	
л. с	ERTIFICATE OF COMPLIAN	CE	OIL COI	SERVATION CO		
_			APPROVED APR 191976			
С	hereby certify that the rules and a ommission have been complied w pove is true and complete to the	BY_W. ar asset				
	dl. 1		TITLESUPERVISOR, DISTRICT I			
	Christing Jonlinson		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 allow- able on new and recompleted wells. Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transport, or other such change of condition.			
<b>.</b>	Christine Toml.					
<b>.</b>	(Date)					
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