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LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMM. ON
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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

RECEIVED

MAY 30 1973

Operator General American Oil Company of Texas /		O. C. C. ARTESIA, OFFICE	
Address P. O. Box 416 Loco Hills, New Mexico 88255			
Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well <input type="checkbox"/>	Change in Transporter of:		
Recompletion <input checked="" type="checkbox"/>	Oil <input type="checkbox"/>	Dry Gas <input type="checkbox"/>	
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/>	Condensate <input type="checkbox"/>	

If change of ownership give name
and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name Keely "C"	Well No. 8	Pool Name, Including Formation Grayburg-Jackson & S. A.	Kind of Lease State, Federal or Fee Fed. LC-028784-c	Lease No.
Location Unit Letter A ; 660 Feet From The North Line and 660 Feet From The East Line of Section 25 Township 17-S Range 29-E , NMPM, Eddy County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Navajo Refining Co. Pipe Line Division	Address (Give address to which approved copy of this form is to be sent) North Freeman Avenue Artesia, N. M. 88210			
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips Petroleum Company	Address (Give address to which approved copy of this form is to be sent) Phillips Building Odessa, Texas 79760			
If well produces oil or liquids, give location of tanks.	Unit F	Sec. 25	Twp. 17-S	Rge. 29-E
Is gas actually connected?		When		
Yes		March 1, 1962		

If this production is commingled with that from any other lease or pool, give commingling order number: _____

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well	Workover	Deepen <input checked="" type="checkbox"/>	Plug Back	Same Res'tv.	Diff. Res'tv.
Date Spudded April, 5, 1973	Date Compl. Ready to Prod. May 1, 1973		Total Depth 3605'		P.B.T.D. 3600'			
Elevations (DF, RKB, RT, GR, etc.) 3602' GL	Name of Producing Formation Grayburg-Jackson		Top Oil/Gas Pay 2486'		Tubing Depth 3575'			
Perforations 2486'-93' (14H); 2602'-07' (10H); 2635'-38' (6H); 3026'-30' (8H) 3173'-80' (14H); 3376'-80' (8H); 3395'-99' (8H); 3528'-31' (6H) 3562'-65' (6H) 3605'								
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
	8 5/8" 24#		459'		50 sacks			
	7" 20#		2848'		100 sacks			
	4 1/2" 9.5# Liner		2815'-3605'		125 sacks			
	2 3/8" OD 4.7# EUE		3575'					

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks May 15, 1973	Date of Test May 25, 1973	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hours	Tubing Pressure ----	Casing Pressure ----	Choke Size ----
Actual Prod. During Test 180 barrels	Oil-Bbls. 40	Water-Bbls. 140	Gas-MCF 35

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

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

W. E. Walter (Signature)
District Superintendent (Title)
May 29, 1973 (Date)

OIL CONSERVATION COMMISSION

APPROVED **MAY 30 1973**
BY **W. A. Grissett**
TITLE **OIL AND GAS INSPECTOR**

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 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.