

DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION
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

AUG 9 1972

Operator General American Oil Co. of Texas	
Address P. O. Box 416, Loco Hills, N. M. 88255	
Reason(s) for filing (Check proper box) 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"/>	
Other (Please explain) O. C. C. ARTESIA, OFFICE	

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Kealy C	Well No. 39	Pool Name, including Formation Grayburg-Jackson	Grbg. & S. A.	Kind of Lease State, Federal or Fee	Lease No. Lc-028784-c
Location Unit Letter B : 25 Feet From The North Line and 2615 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 Company-Pipeline Division	Address (Give address to which approved copy of this form is to be sent) N. Freeman Ave., Artesia, N. M.					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips Petroleum Co.	Address (Give address to which approved copy of this form is to be sent) Phillips Building, Odessa, Texas					
If well produces oil or liquids, give location of tanks.	Unit F	Sec. 25	Twp. 17S	Rge. 29E	Is gas actually connected? Yes	When 3-1-62

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) XXX	Oil Well	Gas Well	New Well	Workover	Deepen XX	Plug Back	Same Resrv.	Diff. Resrv.
Date Spudded 5-8-72	Date Compl. Ready to Prod. 6-27-72		Total Depth 3556'		P.B.T.D. 3550			
Elevations (DF, RKB, RT, GR, etc.) 3596' DF	Name of Producing Formation Grayburg & San Andres		Top Oil/Gas Pay 2422'		Tubing Depth 3500'			
Perforations 2422'-30', 2536'-40', 2566'-70', 2790'-97', 2938'-40', 2949'-52', 3070'-74', 3147'-50', 92'-94', 3252'-55', 93'-3300', 3419'-22' 3466'-59', 3501'-04'					Depth Casing Shoe 3556'			
TUBING, CASING, AND CEMENTING RECORD 3037 3041								
HOLE SIZE 12-1/4"	CASING & TUBING SIZE 8-5/8"		DEPTH SET 399'		SACKS CEMENT 50			
7-7/8"	7"		2849'		100			
6-1/4"	4-1/2" Liner 2827'-3556'		3500'		135			
2-3/8" OD EUE								

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

Date First New Oil Run To Tanks 8-1-72	Date of Test 8-1-72	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hours	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test 110 Barrels	Oil-Bbls. 73	Water-Bbls. 37	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

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)
August 8, 1972 (Date)

OIL CONSERVATION COMMISSION

AUG 9 1972

APPROVED _____
BY **W. E. Walter**
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.