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	GAS
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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Superseding Old C-101 and C-11
Effective 1-1-65

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OCT 10 1978

Operator General American Oil Company of Texas	
Address P. O. Box 128, Loco Hills, New Mexico 88255	
Reason(s) for filing (Check proper box)	
New Well ☐	Change in Transporter of ☐
Recompletion ☒	Oil ☐ Dry Gas ☐
Change in Ownership ☐	Casinghead Gas ☒ Condensate ☐
Other (Please explain)	

If change of ownership give name and address of previous owner

DESCRIPTION OF WELL AND LEASE	
Lease Name Green A	Well No. 1
Pool Name, including Formation Grayburg Jackson	
Kind of Lease State, Federal or Fee Federal	Lease No. NM-14840
Location	
Unit Letter A : 220 Feet From The North Line and 220 Feet From The East	
Line of Section 29 Township 17-S Range 29-E, N.M.P.M., Eddy County	

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS	
Name of Authorized Transporter of Oil ☐ or Condensate ☐	Address (Give address to which approved copy of this form is to be sent)
None	
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)
Phillips Petroleum Company	Phillips Building, Odessa, Texas 79760
If well produces oil or liquids, give location of tanks.	Is gas actually connected? When
	Yes October 3, 1978

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

COMPLETION DATA	
Designate Type of Completion - (X)	Oil Well Gas Well New Well Workover Deepen Plug Back Some Other Kind of Completion
	X
Date Spudded 1931	Date Compl. Ready to Prod. 8-10-77
Total Depth 2263'	P.B.T.D.
Elevations (DF, RAB, RI, GR, etc.) 3593' GR	Name of Producing Formation Grayburg Dolomite
Top Oil/Gas Pay 2184'	Tubing Depth 2200'
Perforations	Depth Casing Shoe

TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
	8 5/8" 24#	297'	
	7" 20#	2130'	

TEST DATA AND REQUEST FOR ALLOWABLE (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	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL			
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

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.	
<u>Randell Harbison</u> (Signature) Assistant Field Superintendent October 5, 1978 (Date)	

OIL CONSERVATION COMMISSION	
APPROVED	OCT 11 1978
BY	<u>W. A. Gressett</u>
TITLE	SUPERVISOR, DISTRICT II
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 gas content of 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 re-completed wells.	
Fill out only Sections I, II, III, and VI for change of owner, well name or number, or transporter or other such change of condition.	