			v
NOT THE COPLEY RECEIVED 5	-		
DISTRIBUTION	NEW MEXICO OIL CO	DNSERVATION COMMISSION	form C-104
SANTA FE		FOR ALLOWABLE	Supersedes Old C+104 and C+1 Effective 1-1-65
FILE		AND	
0.3.6.5.	AUTHORIZATION TO TRAI	NSPORT OIL AND NATURAL GAS	DCT .
LAND OFFICE		. Ko	OCT 1 1 1965
RANSPORTER GAS	- i 4	S Y	OCT,
OPERATOR /			- ¹ / <u>19</u> 65
I. PRORATION OFFICE			ARTE
There are a final demonstration	¥		ESIA, OFFICE
Tenneco Oil Company			· 10g
P.O. Box 1031, Midl	land. Texas		
Reason(s) for filing (Check proper bo		Other (Please explain)	
Ettew Weit	Change in Transporter of:	Change name of lease	e from
Isecompletion	Cal Dry Gas		
la inge in Ownership 🗶	Casinghead Gas 🔄 Condens	sate Effective_10-1-65	·
If change of ownership give name	Leonard Oil Commany 10th	Floor Security Life Bldg.	Poguall New Yorica
and address of previous owner	Leonard OII Company, 100	FIGOR Securicy Life Bidg.	,ROSWEIL, New Mexico
II. DESCRIPTION OF WELL AND	LEASE		
Leave Name	Well No. Pool Nam	ne, Including Formation Kir	nd of Lease
State I	16 Empi	re pbo Sta	te, Federal or Fee State
Location.			
Unit Letter <u>P</u> ; <u>9</u>	90Feet From The southLine	e and <u>330</u> Feet From The _	east
		9 FE , NMPM, Eddy	County
Line of Ception 29 , 70	ownship 17 S hange 2	9 E , NMPM, Eddy	
L DESIGNATION OF TRANSPOR	RTER OF OIL AND NATURAL GA	S	
Name of Authorized Transporter of O.	ii 👷 or Condensate 🗌	Address 'Give address to which approved c	opy of this form is to be sent,
McWood Corp		2003 Wilco Bldg. Midland	L. Texes
Name of Authorized Transporter of C	asinghead Gas 🦲 🛛 or Dry Gas 🚍	Address (Give address to which approved c	opy of this form is to be sent;
Phillips Petroleum	Corp	Room B-2 Phillips Bldg,	Odessa, Texas
If well produces oil or liquids,	Unit [®] Sec. Twp. Rge.		
give location of tanks.	P 29 17 S 29E		iknown
If this production is commingled w V. COMPLETION DATA	with that from any other lease or pool,	give commingling order number:	······
· · · · · · · · · · · · · · · · · · ·	0	New Well Workover Deepen Pi	ig Back Same Res'v. Diff. Res'
Designate Type of Complet	$ion = (\lambda)$	I	1 I
Date Spudded	Date Compi. Ready to Prod.	Total Depth P.	B.T.D.
		: Top Ori/Gas Pay Tu	bing Depth
iocl	Name of Producing Formation	Top Ull/Gds Pay	bing Deptin
Perforations		De	pth Casing Shoe
	TUBING, CASING, AND	CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
		· · · · · · · · · · · · · · · · · · ·	
			<u></u> .
	EOD ALLOWARLE (Text Furthe al	iter recovery of total volume of load oil and i	must be equal to or exceed top allo
V. TEST DATA AND REQUEST OIL WELL		pth or be for full 24 hours)	
Date First New Cil Run To Tanks	. Date of Test	Producing Method (Flow, pump, gas lift, et	c.)
			ncke Size
Length of Test	Tubing Pressure	Casing Pressure Ch	icke Size
-	Oil-Bbis.	Water-Bicls. Go	IS - MCF
Actual Pros. During Test	GII-BDIS.		
l	<u>.</u>	i	
GAS WELL			
Actual Froil, Test-MCF/D	Length of Test	Bbls. Condensate/MMCF Gr	avity of Condensate
	:		
Testing Method (pitot, back pr.)	Tubing Pressure	, Casing Pressure Ci	noke Size
I. CERTIFICATE OF COMPLIA	NCE	OIL CONSERVATIO	UN COMMISSION
		APPROVED 907 1 3 1965	
Commission have been complied	d regulations of the Oil Conservation with and that the information given	neot	
above is true and complete to t	he best of my knowledge and belief.	BY_MILLIMMIZON	9
PUL A		This form is to be filed in com	blinne with EDEF 1104
XLEnnit	R. L. Leggett	If this is a request for allowable	e for a newly drilled or deepen
- ALLES IN	gnature)	well this form must be accompanied	i by a tabulation of the deviati
District Office Super		tests taken on the well in accordan All sections of this form must b	ce with RULE 111. a filled out completely for allo
		All sections of this form must b	e miles our compretery tor ano

October 1, 1965 . .____ . . _

	If this is a request for another ter a month of the
	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.

well out Sections I, II, III, and VI only 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 poel in multiply completed wolfe.