		• • •		v. •			
I	NO. OF COPIES RECEIVED						
	DISTRIBUTION	NEW MEXICO OIL CO	DISERVATION CO	MMISSION	Form C-104		
	SANTA FE	REQUEST F	OR ALLOWABL	Ε		Old C-104 and C-11	
	FILE	AUTHORIZATION TO TRA	AND				
	LAND OFFICE		ECEIV	ED	A3		
	RANSPORTER OIL /						
	GAS OPERATOR		BUN 1 19	66			
I.	PRORATION OFFICE	<u> </u>					
	Operator		ARTEBIA, OFF		DEPCO, Inc. Suite 204		
	Address		ENTROINI SIT		National Bank B	uilding	
	P. 0. Box 427,	Artesia, New Mexico	Cthor (Pla		ia, New Mexico	-	
	Reason(s) for filing <i>(Check proper box)</i>	Change in Transporter of:	Other (Fie	use explain)			
	Recompletion	Cil Dry Gas					
	Change in Ownership X	Casinghead Gas Conden:	sate				
	If change of ownership give name and address of previous owner	rnational Oil & Gas Co	rooration. P.	0. Box 427	Artesia. N	ew Maxiro	
	and address of previous owner				,,		
Π.	DESCRIPTION OF WELL AND LE	Well No. Pocl Nam	e, Including Formatic	m	Kind of Lease		
	Leonard B Federal		rg Jackson Qu		State, Federal or F	ee Federal	
	Location		-	-			
	Unit Letter <u>G</u> ; <u>198</u>	0 Feet From The <u>North</u> Line	and <u>1980</u>	Feet From T	heEast		
	Line of Section 33 , Towns	hip 17 Range	, NM	.Рм,	Eddy	County	
			,				
111.	DESIGN / TION OF TRANSPORTE	R OF OIL AND NATURAL GA	Address (Give addre	ss to which approv	ed copy of this form	is to be sent)	
	Texas New Mexico Pipe Line Midland, Texas						
	Name of Authorized Transporter of Casinghead Gas 💢 cr Dry Gas Address (Give address to which approved copy of this form is to be sent)					is to be sent)	
	Phillips Petroleu	m Lorporation	Udes Is gas actually conn	sa, Texas ected? Whe	'n		
		A 33 17 29	Yes	I	September,	_1961	
	If this pro luction is commingled with	that from any other lease or pool, p	give commingling or	der number:			
17.	COMPLI TION DATA	Cil Well Gas Well	New Well Workov	er Deepen	Plug Back Same	Res'v. Diff. Resty.	
	Designate Type of Completion	in the second			P.B.T.D.		
	Date Spudiled D	ate Compl. Ready to Prod.	Total Depth		F.5.1.5.		
	Pool N	ame of Producing Formation	Tep Cil/Gas Pay		Tubing Depth		
		· · · · · · · · · · · · · · · · · · ·			Depth Casing Shoe		
	Perforations						
	TUBING, CASING, AND CEMENTING RECORD						
	HOLESIZE	CASING & TUBING SIZE	DEPTH	ISET	SACKS C	LMENT	
			· · · · · · · · · · · · · · · · · · ·				
		·······					
			ter recovery of total 1	olume of load oil i	and must be equal to	or exceed ton allow	
V.	TEST DATA AND REQUEST FOR OIL WELL	able for this de	pth or be for full 24 h	ours)			
	Date First New Oil Run To Tanks	Date of Test	Producing Method (F	low, pump, gas lij	t, etc.)		
	Length of Test 7	Tubing Pressure	Casing Pressure		Choke Size		
					Gas - MCF		
	Actual Prod. During Test	oil-Bbis.	Water-Bbis.		Gus-MC:		
	1		<u></u>				
	GAS WELL				Gravity of Condens		
	Actual Prod. Test-MCF/D	length of Test	Bbls. Condensate/N	.MCF	Gravity of Condens	Jule	
	Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure		Choke Size		
			ļ		1		
VI	. CERTIFICATE OF COMPLIANCE		01		TION COMMISS	NON	
	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.		APPROVED -	APPROVEDJUN 1 0 1966 19			
			BY ML Onustring				
			OL AND GAS INSPERTAL				
	\cap						
	(Signature)		Tf this is a	This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepends			
	(Signati	well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.					
	District Engineer		All sections of this form must be filled out completely for allow				
	MAY 2 7 1965 (Tule)		able on new and recompleted wells.				
(Date)			well name or number, or transporter, or other such change of conductor Sectors Some C-101 must be filed for such sectors				
			1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	Sectors of the Data Control of the C	 Apple and the second of the second secon second second sec	(4) (1) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2	