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Ì	DISTRIBUTION			
1	SANTA FE		7	
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	U.S.G.S.			
	LAND OFFICE			
	TRANSPORTER	OIL	1	
į	IMANSFORIER	GAS	1	
	OPERATOR			
	PRORATION OFFICE			
- 1				

December 5, 1972

	DISTRIBUTION /		ONSERVATION COMMISSION FOR ALLOWABLE	Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65		
	U.S.G.S.		AND PSPORT OIL AND NATURAL G	AS		
Ì	LAND OFFICE	AUTHORIZATION TO TRAI	TO OTT OTE PIND THAT OF THE			
	TRANSPORTER GAS /	DEC 8 1972				
	OPERATOR					
1.	Operator ARTESIA, OFFICE					
	SHENANDOAH OIL CORPORATION ~					
	Address 1500 Commer Reason(s) for filing (Check proper box)					
	New We!l	Change in Transporter of: Oil Dry Gas	. 🔲	·		
	Change in Ownership X 12/1/72	2 Casinghead Gas Condens	sate			
	If change of ownership give name and address of previous owner	Atlantic Richfield	Co.; P.O. Box 1610;	Midland, Tex. 79701		
H.	DESCRIPTION OF WELL AND I	LEASE	Wind of Logge	I.eqse No.		
Lease Name Well No. Pool Name, Including Formation						
	F. M. Robinson "B" Unit	tIII 18 Grayburg Jacks	SOIT MAN	TANKELEO LOTTO (E)		
Unit Letter 0; 660 Feet From The South Line and 1980 Feet From The East						
	Line of Section 35 Tow	mship 17S Range	29Е , ммрм, Ес	ldy County		
III.	DESIGNATION OF TRANSPORT	ER OF OIL AND NATURAL GA	S	I will form in to be care!		
	Name of Authorized Transporter of Oil	or Condensate	Address (Give address to which approx P. O. Box 1510, Midland			
	Texas-New Mexico Pipel:	inghead Gas or Dry Gas	Address (Give address to which appro-	ved copy of this form is to be sent)		
	None					
	If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected? Wh	en		
	give location of tanks.	O 35 17S 29E	No			
IV.	If this production is commingled wit COMPLETION DATA			Plug Back   Same Res'v.   Diff. Res'v.		
- • •	Designate Type of Completio	on - (X)	New Well Workover Deepen	Plug Buck   Same ries v.   Sim ries v.		
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth		
	Perforations			Depth Casing Shoe		
	- Criorations					
	TUBING, CASING, AND		D CEMENTING RECORD  DEPTH SET	SACKS CEMENT		
	HOLE SIZE	CASING & TUBING SIZE				
V. TEST DATA AND REQUEST FOR ALLOWABLE  (Test must be after recovery of total volume of load oil and must be equal to or exceed						
V	OIL WELL	able for this de	epth or be for full 24 hours) Producing Method (Flow, pump, gas l			
	Date First New Oil Run To Tanks	Date of Test				
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size		
	Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	Gas-MCF		
	GAS WELL			To the of Condensate		
	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		
	CERTIFICATE OF COMPLIANCE		OIL CONSERV	ATION COMMISSION		
VI	CERTIFICATE OF COMPLIANCE		DEC 8	1972		
		regulations of the Oil Conservation	APPROVED De grassett			
		with and that the information given e best of my knowledge and belief.	BY			
			TITLE OIL AND GAS INSPECTOR  This form is to be filed in compliance with RULE 1104.			
		) /				
	T.P. Bates	J/3n/	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 allow able on new and recompleted wells.			
	T. P. Bates (Signature) Vice Presi	naxure)				
		raenc				

able 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.