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SANTA FE		1		
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U.S.G.S.				
LAND OFFICE				
TRANSPORTER	OIL	1		
TRANSFORTER	GAS			
OPERATOR				
PRORATION OFFICE				
Operator				

September 27, 1971

(Date)

## NEW MEXICO OIL CONSERVATION COMMISSION

Form C-104

	SANTA FE	REQUEST FOR ALLOWABLE		Supersedes Old C-104 and C-110 Effective 1-1-65	
	U.S.G.S. AUTHORIZATION TO TRANSPORT OIL AND NATURAL G		SAS		
	LAND OFFICE		RECEIVED		
	TRANSPORTER GAS	•	TIVED	•	
	OPERATOR /		SEP 28 1971		
1.	PRORATION OFFICE		-21 20 19/1	·	
	Operator Texas American Oil Address	Corporation	O. C. C.		
		gs Building, Midland			
Reason(s) for filing (Check proper box)  Other (Please explain)					
	New Well Recompletion	Change in Transporter of: Oil Dry Gar	s []		
	Change in Ownership	Casinghead Gas Conden	H   Filective IO-	-1-71	
	If change of ownership give name	Kersey & Co., 808 W.	Grand Avenue, Artes	ia, New Mexico	
H.	DESCRIPTION OF WELL AND Lease Name	Well No. Pool Name, Including Fo			
	Randel State	19 Grayburg	Jackson State, Federa	1 or Fee State B-2130	
	Unit Letter D; 9	90 Feet From The North Lin	e and 990 Feet From	The West	
	Line of Section 16 Tov	waship 17-S Range	30-Е , ммрм,	Eddy County	
III.	. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  Name of Authorized Transporter of Oil X or Condensate Address (Give address to which approved copy of this form is to be s				
	Texas New Mexico P	ipeline Company	P. O. Box 1510, Mic	1510, Midland, Texas 79701	
	Name of Authorized Transporter of Cas None		Address (Give address to which appro-		
	If well produces oil or liquids, give location of tanks.	Unit   Sec.   Twp.   Rge.   F   16   17   30	Is gas actually connected? Who	en	
	<u></u>	th that from any other lease or pool,	<u></u>		
IV.	COMPLETION DATA			Plug Back Same Res'v. Diff. Res'v.	
	Designate Type of Completic	on - (X)   Gas Well	New Well Workover Deepen	Plug Back   Same Res'v.   Diff. Res'v.	
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
	2-9-53	4-2-53	2100		
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth 2085	
	Perforations	Queen		Depth Casing Shoe	
	Open Hole			2088	
	WOLF 0175	TUBING, CASING, AND	DEPTH SET	SACKS CEMENT	
	HOLE SIZE	8-5/8"	500	50	
	81	7"	2088	50	
		2-3/8"	2085		
		<u> </u>	<u> </u>		
V.	EST 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. (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable.)				
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas li	ft, etc.)	
		Tubing Pressure	Casing Pressure	Choke Size	
	Length of Test	I uping Presente	Casting 1 1000 m.		
	Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	Gas-MCF	
				<u></u>	
	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
	Actual Prod. 1681-MCF/D	Length of Test			
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
VI.	CERTIFICATE OF COMPLIAN	CE	OIL CONSERVA	TION COMMISSION	
	I hereby certify that the rules and	regulations of the Oil Conservation	APPROVED, 19		
	Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		BY W. a. Grassett		
	Korj H. Valla (Signature)		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 despended well this form must be accompanied by a tabulation of the deviation		
	Production Mana		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.		
	(T)	itle)			

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