DISTRIBUTION SANTA FE FILE U.S.G.S.

NEW MEXICO OIL CONSERVATION CON SION REQUEST FOR ALLOWABLE AND

AUTHORIZATION TO TRANSPORT OIL AND NATURAL CAS RECEIVED

Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65

	LAND OFFICE	AUTHORIZATION TO TRA	ANSFORT OIL AND NATU	KAL GAS	V 12 L)
	TRANSPORTER OIL			SEP 14	1072
	GAS			OLI + 1	13/2
	PROPATION OFFICE	1		O. C.	<u>С</u>
ı.	Operator	 		ARTESIA, D	
		ican Oil Corporation 💆			
Address 1012 Midland Savings Building, Midland, Texas 79701					
	Reason(s) for filing (Check proper box)		Other (Please explain	a.i	
	New Well	Change in Transporter of:			
	Recompletion	Oil Dry Ga	18 Dall Capin	head gastrange	enter
	Change in Ownership	Casinghead Gas X Conder	nsate		
If change of ownership give name					
and address of previous owner					····
II. DESCRIPTION OF WELL AND LEASE					
	Lease Name	Well No. Pool Name, Including F		of Lease	Lease No.
	Randel State	2 Grayburg	Jackson State,	Federal or Fee State	B-2130
	Location D				
	Unit Letter D; 990 Feet From The North Line and 990 Feet From The West				
	Line of Section 16 Tow	vaship 17-S Range	30-E , NMPM,	Eddy	County
Ш.	DESIGNATION OF TRANSPORT			h approved copy of this form is t	o he sent)
	Texas-New Mexico Pip	<u> </u>		10, Midland, Texa	l
	Name of Authorized Transporter of Cas	Inghead Gas X or Dry Gas		h approved copy of this form is t	
	Continental Oil Company		Post Office Box 431, Midland, Texas 79701		
	If well produces oil or liquids,	Unit Sec. Twp. P.ge.	Is gas actually connected?	When	
	give location of tanks.	F 16 17 30	Yes	9-5-72	
	If this production is commingled wit COMPLETION DATA	th that from any other lease or pool,	give commingling order numb	er:	
		Oil Well Gas Well	New Well Workover Dee	pen Plug Back Same Res	'v. Diff. Res'v.
	Designate Type of Completion	(21)	(X)		<u> </u>
	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	
, TUBING, CASING, AND CEMENTING RECOR					
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEN	1ENT
	122				
V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal					read top allows
٧.	OIL WELL	able for this de	pth 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	
	Length of Yest				
	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	
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
			<u> </u>		
VI.	CERTIFICATE OF COMPLIANCE I hereby certify that the rules and regulations of the Oil Conservation		OIL CONSERVATION COMMISSION		
			APPROVED SEP 1 5 1979		
	commission have been complied with and that the information given bove is true and complete to the best of my knowledge and belief.		as Wa Gressett		
	above is true and complete to the	pest of my knowledge and belief.	OU AND CAS INSPECTOR		
			TITLE OIL AND GAS INSPECTOR This form is to be filed in compliance with RULE 1104.		
•	1. Bu	nal			
	- July	mu	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		
Engineer			well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.		

(Title) September 13, 1972 (Date)

All sections of this form must be filled out completely for allowable 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 econoleted wells.