

NO. OF COPIES RECEIVED		5
DISTRIBUTION		
SANTA FE		1
FILE		1
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	1
	GAS	1
OPERATOR		1
PRORATION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS
RECEIVED

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

AUG 8 1973

Operator General American Oil Company of Texas		O.C.C. ARTESIA, OFFICE	
Address P. O. Box 416 Loco Hills, New Mexico 88255			
Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well <input type="checkbox"/>	Change in Transporter of:	Prior: Shut in well in Grayburg-Paddock Pool.	
Recompletion <input checked="" type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>	Recompleted in Grayburg-Jackson Pool	
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>		

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Burch A	Well No. 17	Pool Name, including Formation (Grayburg & San Andres)	Kind of Lease State, Federal or Fee Fed.	Lease No. 028793 (a)
Location Unit Letter P ; 660' Feet From The South Line and 660' Feet From The East Line of Section 18 Township 17-S Range 30-E , NMPM, Eddy County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Navajo Pipe Line Division	Address (Give address to which approved copy of this form is to be sent) North Freeman Avenue Artesia, N. M. 88210					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips Petroleum Company	Address (Give address to which approved copy of this form is to be sent) Phillips Building Odessa, Texas 79760					
If well produces oil or liquids, give location of tanks.	Unit F	Sec. 19	Twp. 17S	Rge. 30E	Is gas actually connected? Yes	When July 20, 1973

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	X	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded Re-entered 7-10-73	Date Compl. Ready to Prod. July 20, 1973	Total Depth 4220'		P.B.T.D. 3807'					
Elevation (DF, RKB, RT, GR, etc.) 3647' GR	Name of Producing Formation Grayburg & San Andres	Top Oil/Gas Pay 2471'		Tubing Depth 3700'					
Perforations 2471'-2478'; 2592'-2598'; 3140'-3146'; 3307'-3315'; 3410'-3414'; 3431'-3435'; 3565'-3573'.		Depth Casing Shoe 7" 4209'							
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		SACKS CEMENT					
	13 3/8"	351'		325 sacks					
	9 5/8"	2726'		1450 sacks					
	7"	2685'-4209'		300 sacks					

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 top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks August 1, 1973	Date of Test August 4, 1973	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hours	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls. 153	Water - Bbls. 109 Load Water	Gas - MCF 150

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bble. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

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.

W. E. Walter (Signature)
District Superintendent
August 7, 1973 (Date)

OIL CONSERVATION COMMISSION
APPROVED **AUG 9 1973**
BY **W. A. Gressett**
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 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 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 completed wells.