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12-15-76

(Date)

NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE AND

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

U.S.G.S.	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS				
LAND OFFICE	RECEIVED				
TRANSPORTER GAS /	HEL!				
OPERATOR / PRORATION OFFICE	DEC 27 1976				
Operator HOLLY ENERGY, I	NC V	C. C.			
Address	ARTES	IA, OFFICE			
Reason(s) for filing (Check proper b	R, SUITE 2680, DALLAS, TE	XAS 75201 Other (Please explain)			
New Well	Change in Transporter of:	oner (Freuse explain)			
Recompletion Change in Ownership	OII Dry Go	 			
12-15-	Castinghead Gas Conde	nsate			
If change of ownership give name and address of previous owner	Franklin, Aston & Fai	r, Ltd., P.O. Box 1090,	Roswell, N. M. 88201		
DESCRIPTION OF WELL AND	D LEASE. Well No. Pool Name, Including F	ormation Kind of Lea	se Lease No.		
McIntyre A	2 Grayburg-Jac	kson (Q.G.S.A.) State, Feder	d or Fee Federal LC054280		
Location Unit Letter P :	990 Feet From The South Lir	.000	To a la		
Onit Letter 1 ;	770 reet from the 300LII Lin	re and 990 Feet From	The East		
Line of Section 20 T	ownship 17S Range	30E , NMPM, Edd	y County		
	RTER OF OIL AND NATURAL GA				
Name of Authorized Transporter of C	or Condensate	Address (Give address to which appr	oved copy of this form is to be sent)		
Name of Authorized Transporter of C	asinghead Gas or Dry Gas X	singhead Gas or Dry Gas X Address (Give address to which approved copy of this form is to			
Continental Oil Co.	Unit Sec. Twp. Rge.	Box 2197, Houston, Texas 77001 Sec. Twp. Pge. Is gas actually connected? When			
If well produces oil or liquids, give location of tanks.	P 20 17s 30E	Yes	3/10/72		
If this production is commingled v. COMPLETION DATA	with that from any other lease or pool,				
Designate Type of Complet	ion — (X)	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.		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top O!l/Gas Pay Tubing Depth			
Perforations			Depth Casing Shoe		
	TUDING CASING AND	D CEVENTING DECORD			
HOLE SIZE	CASING & TUBING SIZE	D CEMENTING RECORD DEPTH SET	SACKS CEMENT		
TEST DATA AND REQUEST : OIL WELL	FOR ALLOWABLE (Test must be a able for this de	fter recovery of total volume of load oi epth or be for full 24 hours)	l and must be equal to or exceed top allow		
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas l	ift, etc.)		
Length of Test	Tubing Pressure	Casing Pressure	Choke Size		
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF I Day		
			12-31-1		
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate		
135	24 Tubing Pressure (shut-in)	None Casing Pressure (Shut-in)	Choke Size		
Testing Method (pitot, back pr.)	60	Cdeing Pressure (Bilde-11)	20/64		
CERTIFICATE OF COMPLIANCE		11	ATION COMMISSION		
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 DEC 2 9 1976			
		BY W, M, STRICT II			
TITLE SUPERVISOR, DISTRICT, IL					
			This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepened		
(51)	inature)	well, this form must be accomp tests taken on the well in acco	anied by a tabulation of the deviation		
J. H. Lyon Operations Mar. (Title)			ust be filled out completely for allow-		

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.