NO. OF COPIES REC		+	-
DISTRIBUTION		<u> </u>	<u> </u>
SANTA FE			
FILE		V	100
U.S.G.S.			
LAND OFFICE			1
TRANSPORTER	OiL	1.7	
	GAS	V.	
OPERATOR		1/	1
BRODATION OF		T	$\Gamma$

## NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALBOWABLE

Form C-104
Supersedes Old C-104 and C-110

	FILE V	]	AND	Ε	iffective 1-1-65		
	U.S.G.S.	AUTHORIZATION TO TRA	NSPORT OIL AND NA	TURAL GAS			
	LAND OFFICE		FEB 15 1983				
	TRANSPORTER OIL						
	GAS V	1	O. C. D.				
•	PRORATION OFFICE ARTESIA, OFFICE						
1.	Operator						
Damson Oil Corporation							
	Address						
	P. O. Box 4391, Housto		Other (Please ex	-1-1-1			
	Reason(s) for filing (Check proper box,	Change In Transporter of:	Other (Fredse ex	plain;			
	Recompletion	OII Dry Ga	s				
	Change in Ownership Casinghead Gas Condensate						
	If change of ownership give name Petroleum Corporation of Texas, P.O. Box 911, Breckenridge, TX 76024						
11.	DESCRIPTION OF WELL AND LEASE  Lease Name   Weil No.   Pool Name, Including Formation   Kind of Lease   Lease						
	Berry "A" Federal 4 Grayburg Jackson SR-Q-G-SA State, Federal 054				ederal 054988A		
	Location				· · · · · · · · · · · · · · · · · · ·		
	Unit Letter F 2310 Feet From The North Line and 2310 Feet From The West						
		1.00	200	T . 1			
	Line of Section 21 Tov	vnship 17S Fange	30E , NMPM,	Eddy	County		
111	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA	S				
	Name of Authorized Transporter of Cil	or Condensate	Address (Give address to a	which approved copy of	this form is to be sent)		
	Texas-New Mexico Pipe	Line Company	P.O. Box 2528, I	Hobbs, NM 882	NM 88240 wed copy of this form is to be sent)		
	Name of Authorized Transporter of Cas	singhead Gas 📆 or Dry Gas 🗔	Address (Give address to t	vhich approved copy of	this form is to be sent)		
	Phillips Petroleum Com	pany   Unit   Sec.   Twp.   Age.	424 HS & L Build	ding, Bartlesv	ille, OK 74004		
	If well produces oil or liquids, give location of tanks.	C 21 17S 30E		1	7-22-81		
	<u> </u>	th that from any other lease or pool,	Yes	ımher:	1,22,01		
	COMPLETION DATA		give comminging order in				
	Designate Type of Completic	on - (X)	New Well Workover	Deepen Plug Bac	k   Same Restv. Diff. Restv.		
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.			
	Date spadded						
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oll/Gas Pay	Tubing D	epth		
			<u> </u>		o(== Chan		
	Perforations		Depth Casing Shoe				
		TUBING, CASING, AND	CEMENTING RECORD				
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		SACKS CEMENT		
					<u></u>		
17	TEST DATA AND REQUEST EA	OP ALLOWARIE (Test must be a	feer recovery of total volume	of load oil and must be	e equal to or expeed top allow-		
٧.	TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed to able for this depth or be for full 24 hours)						
Date First New Oil Run To Tanks Date of Test Producing Method (Flow, pump, gas lift, etc.					n Hr		
	( T	Tubing Pressure	Casing Pressure	Choke Si	20 10 0		
	Length of Test	Tubing Pieseme					
	Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	Gas - MC	E 69 63		
	•				No the second		
	GAS WELL		Bbis. Condensate/MMCF	Genuity c	of Condensate		
	Actual Prod. Test-MCF/D	Length of Test	Bbis. Condensate/MMCF	Gravity o	7 Condensary		
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-is)	Casing Pressure (Shut-i	Choke Si	20		
VI. CERTIFICATE OF COMPLIANCE OIL CONSERVAT					OMMISSION		
				FEB 1 7 1983			
I hereby certify that the rules and regulations of the Oil Conservation				/ //	, 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	Madde			
		OIL AND GAS INSPECTOR					
	_			- 61-4 t	e with mill # 1164		
	This form is to be filed in compliance with RULE 11  If this is a request for allowable for a newly drilled on the second				newly drilled or deepened		
	H.A. Jenning	× 12.	well this form must b	e accompanied by a	tabulation of the deviation		

REGULATORY ENGINEER (Title)

2-1-83

(Date)

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