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NEW MEXICO OIL CONSERVATION COMM REQUEST FOR ALLOWABLE AND

ON

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 RECEIVED					
	OPERATOR SEP -8 1972 PRORATION OFFICE					
1.	Operator / D. C. C.					
	Penasco Corporation ARTOSIA, OFFICE					
	Box 426	Artesia, New Mexico				
	Reason(s) for filing (Check proper box)	Other (Please	Other (Please explain)			
	Recompletion	Change in Transporter of: Oil Dry Ga	g			
	Change in Ownership	Casinghead Gas Conder	isale 🔲			
	If change of ownership give name and address of previous owner	Anadarko Production	A	_	Plaza East Houston, Texas 7704	-6
II.	DESCRIPTION OF WELL AND	LEASE Well No Pool Name, Including F	ermation	Kind of Lease	Lease No	
	Federal "B"	7 Fren Seven		State, Federal		
	Unit Letter P : 660	Feet From The South Lin	e and <u>660</u>	Feet From T	The <u>East</u>	-
	Line of Section 22 Tov	vnship 178 Range	30E , NMPM	. Edd	County	<u>,</u>
II.	DESIGNATION OF TRANSPORT	rer of oil and natural ga	Address (Give address	to which approx	ved copy of this form is to be sent)	1
	Texas-New Mexico Pipe Name of Authorized Transporter of Cas	Line Company	Box 1510 Address (Give address	Midl to which approx	and Texas ved copy of this form is to be sent)	_
	Phillips Petroleum Co					
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge.	Bartlesville	ed? Whe	er.	
	If this production is commingled wit	th that from any other lease or pool,	give commingling orde	r number:		_
IV.	Designate Type of Completic	on - (X) Gas Well Gas Well	New Well Workover	Deepen	Plug Back Same Res'v. Diff. Res	٠v.
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	**************************************	F.B.T.C.	
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top CII/Gas Pay		Tubing Depth	
	Perforations				Depth Casing Shoe	
	TUBING, CASING, AND CEMENTING RECORD					
	HOLE SIZE	CASING & TUBING SIZE	DEPTHS	ET	SACKS CEMENT	
V.	TEST DATA AND REQUEST FO	OR ALLOWABLE (Test must be a able for this de	fter recovery of total volu 19th or be for full 24 hour:	ime of load oil: s)	and must be equal to or exceed top all	ow•
	OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow		ft, etc.)	
	Length of Test	Tubing Pressure	Casing Pressure		Choke Size	
	Actual Prod. During Test	Oil-Bbis.	Water-Bble.		Gas-MCF	
	GAS WELL		Bbls. Condensate/MMC	· E	Gravity of Condensate	
	Actual Prod. Test-MCF/D	Length of Test	BDIB. CONGENEGIE/MMC	r	Glavity of Condensate	
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut	:-in)	Choke Size	
VI.	CERTIFICATE OF COMPLIANCE		OIL CONSERVATION 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			
			BY W. a. Gressett			
			TITLE OIL AND	GAS INSPEC	TOB	
	0 000	This form is to be filed in compliance with RULE 1104.				

(Signature)

(Title)

Agent

9-1-72

(Date)

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.