STATE OF NEW MEXICO ERGY AND MINERALS DEPARTMENT DISTRIBUTION FILE FILE U.S.U.S. LAND OFFICE

april 11, 1983

OIL CONSERVATION DIVIS

Form C-104 Revised 10-1-,18 RECEIVED

P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

JUN 24 1983

REQUEST FOR ALLOWABLE .

FIII out only Sections I, II, III, and VI for changes of owner well name or number, or transporten or other such change of condition Separate Forms C-104 must be filed for each pool in multiply

O. C. D.

OPERATION OFFICE		AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS ARTESIA, OFFICE						
Operator	illips Oi	il Compan	у					
Address P.	O. Box	L28, Loco	Hills, New Mex	cico 88255				
Reason(s) for filing (Chec New Well Recompletion Change in Ownership X	Other (Please explain) Change in Transporter of: Change in Lease Name Other (Please explain) Change in Lease Name Maddren B							
If change of ownership and address of previous		eneral Am	erican Oil Co.	of Texas, P. O.	Box 128,	Loco Hills, NM	88255	
DESCRIPTION OF WI	ELL AND I	Well No.	Pool Name, Including F Fren Se	ormation even Rivers	Kind of Lease State, Federal	orf•• Federal	Lecse No. NM 0467934	
Location			L		<u> </u>		.1_0407334	
Unit LetterJ	:2310	Feet Fro	om The South Li	ne and <u>1650</u>	Feet From 7	h• East		
Line of Section 27	T. #	nship	17-S Range	30-E , NMPN	А,	Eddy	County	
DESIGNATION OF THE Name of Authorized Trans	RANSPORT	ER OF OIL	AND NATURAL G	Address (Give address		ed copy of this form is t		
Navajo Refining	Company	- Pipe	line Division	P.O. Box 159 Address (Give address	Artesia,	New Mexico 88 ed copy of this form is a	o be sent)	
If well produces oil or liq		Unit Sec	Twp. Rge.	Is gas actually connect	ed? Whe	n.		
give location of tanks. If this production is con	mingled with	L			r number:			
COMPLETION DATA		10	Oll Well Gas Well	New Well Workover	Deepen	Plug Back Same Res	'v. Dill. Res'v	
Designate Type of	Completion		Ready to Prod.	Total Depth		P.B.T.D.	i	
	CP	Name of Prod	ucing Fermation	Top Oil/Gas Pay		Tubing Depth		
Perforations	, ол, ес.,					Depth Casing Shoo		
Periorations								
HOLE SIZE		TUBING, CASING, AND		DEPTH SET		SACKS CEMENT		
HOLE SIZE								
TEST DATA AND RE	QUEST FO	R ALLOWA	BLE (Test must be able for this d	after recovery of total voluepth or be for full 24 hour	s)		M ceed top allow	
Date First New Oil Run T	o Tanks	Date of Test		Producing Method (Flor	w, pump, gas 11)	i, eic.)) 	
Length of Test		Tubing Press	ur•	Casing Pressure		Choke Size	3 0	
Actual Pred. During Test		CII-Bble.		Water-Bbls.		Gas-MCF	Day and	
					•	14.00	1 al	
GAS WELL Actual Prod. Test-MCF/	D	Length of Ter	nt .	Bbls. Condensate/MMC	:F	Gravity of Condensate		
Teeting Method (pitot, bo	ck pr./	Tubing Press	we(shut-in)	Cosing Pressure (Shut	-1n)	Chois Size		
CERTIFICATE OF C	OMPLIANC	E		il .nu	IN 2 8 198	ION DIVISION	19	
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given				APPROVED	APPROVED Original Signed by Leslie A. Clements			
above is true and comp	olete to the	best of my	knowledge and belief.	11	Supervisor Di	strict U		
		,, ,		TITLE	o to filed in a	compliance with MULI	E 1104.	
Lendell N. Hawkins (Superintendent				If this is a request for allowable for a newly drilled or deepens 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 allow				
Fi	eld Super		<u> </u>	All sections o	f this form mu scomplated we	et be filled out comple	RIBLY TOT BILLY	