

DISTRIBUTION		5	
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ILE		1	✓
S.G.S.			
AND OFFICE			
TRANSPORTER	OIL	1	
	GAS		
OPERATOR		2	
PRORATION OFFICE			

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

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

RECEIVED

DEC 4 1975

I. Operator
General American Oil Company of Texas ✓
Address
P. O. Box 416 Loco Hills, New Mexico 88255
Reason(s) for filing (Check proper box)
New Well ☐ Change in Transporter of: ☐ Dry Gas ☐
Recompletion ☒ ☒ Condensate ☐
Change in Ownership ☐
Other (Please explain)
Change from Cont. Oil Co.
former inj. returned to Prod.

II. DESCRIPTION OF WELL AND LEASE

Lease Name Beeson "F"	Loco Hills	Kind of Lease State, Federal or Fee Fed. LC -	Lease No. 060529
Location Unit Letter A 990	East from The North line and 330	Feet From The East	
Line of Section 31	17-South	Range 30-East	NMPM, Eddy County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> Condensate <input type="checkbox"/> Navajo Crude Oil Purchasing Company	Address (Give address to which approved copy of this form is to be sent) P. O. Drawer 175 Artesia, New Mexico 88210
Name of Authorized Transporter of Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks. F 25 17-S 29-E	Is gas actually connected? NO When

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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Resrv.	Diff. Resrv.
Date Spudded	Date Drilled	Total Depth 3082	P.B.T.D.				
Elevations (DF, RKB, RT, CR, etc.)	Name of Producing Formation Q + Sh.	Oil/Gas Pay 2301	Tubing Depth				
Perforations 2301-08 2567-74 2826-46 OH-3000-82	Depth Casing Shoe						
TUBING, CASING, AND CEMENTING RECORD							
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT				
	8 7/8"	644	50				
	7"	2733	100				
	5 1/2" liner	2686-2992	56				

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

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 December 1, 1975	Date of Test December 1, 1975	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test 24 hours	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test 70 barrels	Oil-Bbls 20	Water-Bbls 50	Gas-MCF TSTM

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. 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.

Roy Crow

District Superintendent

December 2, 1975

OIL CONSERVATION COMMISSION

APPROVED DEC 5 1975
BY W. A. Gressett
TITLE SUPERVISOR, DISTRICT II

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产ated wells.