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DISTRIBUTION	NEW MEXICO OIL C	CONSERVATION COMMISSION	Form C-104
SANTA FE	REQUEST	FOR ALLOWABLE	Supersedes Old C-1() and C-11
FILE			Effective 1-1-65
U.S.G.S.	AUTHORIZATION TO TRA	AND ANSPORT OIL AND NATURAL (	SASPELLETAED
LAND OFFICE			
TRANSPORTER OIL			SEP 1 9 1969
GAS			SEI I / 2000
OPERATOR			o. c. c.
) PRORATION OFFICE			ARTERIA. OFFICE
Operator	,		
Atlantic Richfield Cor	npany 🗸		
Ad tress			
P. O. Box 1978, Roswell			
Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well	Change in Transporter of:		
Recompletion	Oil Dry Go	rs Eff: 7-1-69	1 1/6/
Change in Ownership	Casinghead Gas X Conde	ndate [ ]	from Skilly
If change of ownership give name		·	
and address of previous owner			
II. DESCRIPTION OF WELL AND I	JEASE WALLSON FROM STREET	rme, Including Formation	Kind of Lease 029435 A
Leane Name			State, Federal or Fee Federal
J. L. Keel "A"	4 Gr	ayburg Jackson	Sidie, Federal C. Fee Feller 21
Location	- T	0210	West
Unit Letter K; 16	Feet From The South Lin	ne and Feet From '	The Hest
	4 110	21 F	
Line of Section 7 Tow	unship 17S Range	31E NMPM, Eddy	County
(II. DESIGNATION OF TRANSPORT Name of Authorized Transporter of Cil		As Address (Give address to which appro	red conv of this form is to be sent!
i		P. O. Bcx 1510, Midla	
Texas New Mexico Pipel	. The Company		
i		P. O. Bcx 1207, Ponca	City. Oklahoma 74601
Continental Oil Compar	<del>,</del>		
If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected? Wh Yes	6-3-60
give location of tunks.	<u> </u>	1	
If this production is commingled wit	h that from any other lease or pool,	give commingling order number:	
IV. COMPLETION DATA	Oi. Well Gas Well	New Well Workover Deepen	Plug Back   Sane Resty, Diff, Resty,
Designate Type of Completio			
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Date opassed			·
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
(21, MB, M, ON, CLL)			
Perforations			Depth Casing Shoe
		•	
	TIIRING CASING AN	D CEMENTING RECORD	
HOLE SIZE			
		DEPTH SET	SACKS CEMENT
	CASING & TUBING SIZE		SACKS CEMENT
			SACKS CEMENT
			SACKS CEMENT
			SACKS CEMENT
V TEST DATA AND DEQUEST FO	CASING & TUBING SIZE	DEPTH SET	
V. TEST DATA AND REQUEST FO	CASING & TUBING SIZE  OR ALLOWABLE (Test must be a	DEPTH SET	
V. TEST DATA AND REQUEST FOOIL WELL  Date First New Oil Run To Tanks	CASING & TUBING SIZE  OR ALLOWABLE (Test must be a	DEPTH SET	and must be equal to or exceed top allou
OIL WELL	CASING & TUBING SIZE  OR ALLOWABLE (Test must be a able for this d	DEPTH SET  after recovery of total volume of load oil epth or be for full 24 hours)	and must be equal to or exceed top allou
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OIL WELL  Date First New Oil Run To Tanks  Length of Test  Actual Prod. During Test  GAS WELL	CASING & TUBING SIZE  OR ALLOWABLE (Test must be able for this described of Test)  Tubing Pressure  Oil-Bbls.	DEPTH SET  after recovery of total volume of load oil epth or be for full 34 hours)  Producing Method (Flow, pump, gas li Casing Pressure)  Water-Bbls.	and must be equal to or exceed top allow ft, etc.) Choke Size Gas-MCF
OIL WELL  Date First New Oil Run To Tanks  Length of Test  Actual Prod. During Test  GAS WELL	CASING & TUBING SIZE  OR ALLOWABLE (Test must be able for this described of Test)  Tubing Pressure  Oil-Bbls.	DEPTH SET  after recovery of total volume of load oil epth or be for full 34 hours)  Producing Method (Flow, pump, gas li Casing Pressure)  Water-Bbls.	and must be equal to or exceed top allow ft, etc.) Choke Size Gas-MCF
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OIL WELL  Date First New Oil Run To Tanks  Length of Test  Actual Prod. During Test  GAS WELL  Actual Prod. Test-MCF/D  Testing Method (pitot, back pr.)	CASING & TUBING SIZE  OR ALLOWABLE (Test must be a able for this d  Date of Test  Tubing Pressure  Oil-Bble.  Length of Test  Tubing Pressure	DEPTH SET  after recovery of total volume of load oil epth or be for full 34 hours)  Producing Method (Flow, pump, gas li Casing Pressure)  Water-Bbis.  Bbis. Condensate/MMCF  Casing Pressure	and must be equal to or exceed top allow ft, etc.) Choke Size Gas-MCF Gravity of Condensate
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Mat'l Acctg Supervisor

August 28, 1969 (Title)

(Date)

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. Separat: Forms C-104 must be filed for each pool in multiply completed wells.