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

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

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MAY 19 1972

O. C. C.

ARTESIA, OFFICE

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)		Other (Please explain)	
New Well	<input checked="" type="checkbox"/>	Change in Transporter of:	
Recompletion	<input type="checkbox"/>	Oil	<input type="checkbox"/>
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>
		Dry Gas	<input type="checkbox"/>
		Condensate	<input type="checkbox"/>

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Burch C	21	Grayburg-Jackson	State, Federal or Fee Fed.	LC-028793-c
Location				
Unit Letter	B	660 Feet From The	N	Line and 1980 Feet From The
				E
Line of Section	18	Township	17-S	Range 30-E, NMPM, Eddy County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil	<input checked="" type="checkbox"/>	or Condensate	<input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Navajo Refining Co., Pipe Line Division				N. Freeman, Artesia, N.M. 88210
Name of Authorized Transporter of Casinghead Gas	<input checked="" type="checkbox"/>	or Dry Gas	<input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Phillips Petroleum Company				Phillips Bldg. Odessa, Texas
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.
	H	13	17-S	29-E
Is gas actually connected?	Yes	When	5-12-72	

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)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Restv.	Diff. Restv.
	X		X					
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
4-16-72	5-12-72		3614'		3608'			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
3655' GL	Grayburg & San Andres		2518'		3550'			
Perforations	2518'-2526', 2614'-2618', 2644'-2647', 2688'-2693', 3338'-3346', 3589'-3597'				Depth Casing Shoe			
					3614'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/2"	8-5/8"		497' KB		100 sacks			
7-7/8"	4-1/2"		3614' KB		400 sacks			
	2-1/2" RUE		3550'					

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	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
5-12-72	5-12-72	Flowing	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 Hours	---	200#	---
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF
289 Barrels	189	100 Load	350

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.

W. E. Walter/ (Signature)

District Superintendent (Title)

May 17, 1972 (Date)

OIL CONSERVATION COMMISSION

APPROVED MAY 19 1972, 19
BY W. A. Gressett
TITLE OIL AND GAS INSPECTOR

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 completed wells.