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NEW MEXICO OIL CONSERVATION COMMISSION  
**RECEIVED**  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS  
JUN 28 1972

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

O. C. C.  
ARTESIA, OFFICE

Operator	
<del>General American Oil Company of Texas</del>	
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"/>	CASINGHEAD GAS MUST NOT BE FLARED AFTER 8:22-72 UNLESS AN EXCEPTION TO R-4070 IS OBTAINED
Recompletion <input type="checkbox"/>	
Change in Ownership <input type="checkbox"/>	
Change in Transporter of:	
Oil <input type="checkbox"/>	Dry Gas <input type="checkbox"/>
Casinghead Gas <input type="checkbox"/>	Condensate <input type="checkbox"/>
If change of ownership give name and address of previous owner	

**DESCRIPTION OF WELL AND LEASE**

Lease Name	Well No.	Pool Name, Including Formation	Grbgg.	Kind of Lease	Lease No.
McIntyre G	2	Grayburg-Jackson	AS.A.	State, Federal or Fee Fed	NM-0558581
Location					
Unit Letter	G	1650 Feet From The	North	Line and	2310 Feet From The
				East	
Line of Section	21	Township	17S	Range	30E
				NMPM,	Eddy
				County	

**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. Pipeline Division	N. Freeman Ave. Artesia, N. M.					
Name of Authorized Transporter of Casinghead 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.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	B	21	17S	30E	No	

If this production is commingled with that from any other lease or pool, give commingling order number:

**COMPLETION DATA**

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
	XX		XX					
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
5-29-72	6-20-72		3624'		3618'			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
3665' BL	Grayburg-Jackson		2605'		3570'			
Perforations	2605'-08', 2633'-38', 2727'-30', 2736'-39', 2754'-57', 2842'-47', 2992'-3000', 2980'-86', 3168'-76', 3524'-32'				Depth Casing Shoe			
					3624'			

**TUBING, CASING, AND CEMENTING RECORD**

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-1/4"	8-5/8"	560'	100
7-7/8"	4-1/2"	3624'	500
	3-3/8" OD EUE	3570'	

**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.)	
6-22-72	6-22-72	Pumping Flow	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hours			
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF
160 Bbls.	110	50 Load	200

**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

**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  
District Superintendent

June 27, 1972

(Date)

**OIL CONSERVATION COMMISSION**

APPROVED JUN 29 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.

RECEIVED  
JAN 10 1964  
U.S. DEPARTMENT OF AGRICULTURE  
WASHINGTON, D.C.