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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

DEC 6 1972

O. C. C.
ARTESIA, OFFICE

I.

Operator
Texas American Oil Corporation

Address
1012 Midland Savings Building, Midland, Texas 79701

Reason(s) for filing (Check proper box)

New Well [X]   Change in Transporter of: Other (Please explain)

Recompletion [ ]   Oil [ ]   Dry Gas [ ]

Change in Ownership [ ]   Casinghead Gas [ ]   Condensate [ ]

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.
Etz J State	22	Grayburg Jackson	State, Federal or Fee State	B-1483

Location

Unit Letter O ; 990 Feet From The South Line and 2310 Feet From The East

Line of Section 16   Township 17-S   Range 30-E , NMPM, Eddy   County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil [X] or Condensate [ ]	Address (Give address to which approved copy of this form is to be sent)
Texas-New Mexico Pipeline Company	P. O. Box 1510, Midland, Texas 79701
Name of Authorized Transporter of Casinghead Gas [ ] or Dry Gas [ ]	Address (Give address to which approved copy of this form is to be sent)
Continental Oil Company	P. O. Box 431, Midland, Texas 79701

If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	N	16	17	30	Yes	12-1-72

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 (X)	Gas Well	New Well (X)	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.

Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
11-4-72	11-26-72	4050'	4008'

Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
3672 GR	Grayburg-San Andres	2539'	3970'

Perforations	Depth Casing Shoe
2539 - 3985 w/129 holes	4050'

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
11"	8-5/8"	528'	100 sx
7-7/8"	5-1/2"	4050	600 sx

V. TEST DATA AND REQUEST FOR ALLOWABLE (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)
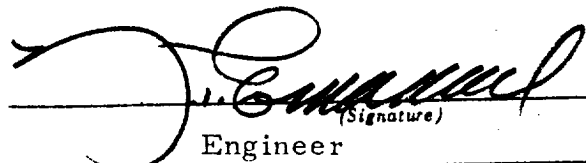
OIL WELL

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
12-1-72	12-4-72	Pump	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 Hrs	None	None	
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF
	93	240 LW	85

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.

(Signature)

Engineer
(Title)

December 5, 1972
(Date)

OIL CONSERVATION COMMISSION

APPROVED DEC 6 1972 , 19___

BY _____

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