NO. OF COPIES RECEIVED		16	16	
DISTRIBUT	1	T		
SANTA FE		17		
FILE U.S.G.S.				
LAND OFFICE			<u></u>	
TRANSPORTER	OIL		1	
	GAS	<u>L</u> '	]	
OPERATOR		]]		
PRORATION OFFICE			1	

December 5, 1972

(Date)

<u> </u> -	DISTRIBUTION SANTA FE	REQUEST F	NSERVATION COMMISSION OR ALLOWABLE AND	Form C-104 Supersedes ( Effective 1-1	Old C-104 and C-110 -65		
	U.S.G.S.	AUTHOBIADIION ED DRAN		AL GAS			
	TRANSPORTER GAS	DEC 6 1972					
-	OPERATOR /						
. L	Operator ARTESIA, OFFICE						
	Texas American Oil C						
	Address	Puilding Midland Toy	a 70701				
Ь	Reason(s) for filing (Check proper box)	Building, Midland, Texa	Other (Please explain				
- 1	New We!I	Change in Transporter of:					
	Recompletion	Oil Dry Gas	751				
Ŀ	Change in Ownership	Casinghead Gas Condens	sate				
I:	change of ownership give name						
	DESCRIPTION OF WELL AND L	EASE   Well No.   Pool Name, Including For	rmation Kind o	f Lease	Lease No.		
	Etz J State	22 Grayburg Ja	State	Federal or Fee State	B-1483		
+	Location			<b>~</b>			
	Unit Letter O; 990	Feet From The South Line	and 2310 Feet	From The East			
	• /	nship 17-S Range		Eddy	County		
II. ]	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GAS  or Condensate	S Address (Give address to which	approved copy of this form	is to be sent)		
i i	Texas-New Mexico Pi	peline Company	P. O. Box 1510.	Midland, Texas 7	9701		
	Name of Authorized Transporter of Cas	1					
ļ	Continental Oil Comp	Unit Sec. Twp. P.ge.	Is gas actually connected?	D. Box 431, Midland, Texas 79701  when When			
	If well produces oil or liquids, give location of tanks.	N 16 17 30	Yes	12-1-72			
. I	f this production is commingled wit COMPLETION DATA	h that from any other lease or pool, g			Det Diff Books		
٦	Designate Type of Completio	(V)	New Well Workover Dee	pen Plug Back Same	Hes.v. Diff. Res.v.		
		Date Compl. Ready to Prod.	(X) Total Depth	P.B.T.D.	<u>i</u>		
	Date Spudded 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	25391	39701 Depth Casing Shoe			
	2539 - 3985 w/129 holes			4050'			
	TUBING, CASING, AND CEMENTING RECORD						
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS	EMENT		
	11"	8-5/8"	528'	100-эж			
	7-7/8"	5-1/2"	4050	600-sx			
v.	TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a able for this de	fter recovery of total volume of i	oad oil and must be equal to	or exceed top allow		
	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 Casing Pressure	Choke Size	Lobels Stee		
	Length of Test	Tubing Pressure		Choke Size			
	24 Hrs	None None	None Water-Bble.	Gas-MCF			
	Actual Prod. During Test	93	240 LW	85	<u>, , , , , , , , , , , , , , , , , , , </u>		
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Conden	sate		
			Casing Pressure (Shut-in)	Choke Size			
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)					
VI.	CERTIFICATE OF COMPLIAN	CATE OF COMPLIANCE		SERVATION COMMISS			
	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.		APPROVED_DEC	7			
	above is true and complete to th	C DEST OF HIS WHOCH SARE SAND SAND	TITLE OIL AND GAS INSPECTOR				
					110A		
	7	· · · · · ·	This form is to be filed in compliance with RULE 1104.  If this is a request for allowable for a newly drilled or deepene well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.				
		nature)					
	Engineer	All sections of this form must be filled out compl		mpletely for allow			
		20101	All sections of this form must be filled out completely for all				

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