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LAND OFFICE		
TRANSPORTER	OIL	1
	GAS	
OPERATOR		
PRORATION OFFICE		

CORRECTED FORM

NEW MEXICO OIL CONSERVATION COMMISSION

REQUEST FOR ALLOWABLE

AND

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

RECEIVED

Form C-104

Supersedes Old C-104 and C-110

Effective 1-1-65

DEC 4 1974

Operator		O. C. C.	
WINDFOHR OIL COMPANY ✓		ARTESIA, OFFICE	
Address			
1202 First National LBank Building, Fort Worth, Texas 76102			
Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well	<input checked="" type="checkbox"/>	CASINGHEAD GAS MUST NOT BE	
Recompletion	<input type="checkbox"/>	FLARED AFTER 1-1-75	
Change in Ownership	<input type="checkbox"/>	UNLESS AN EXCEPTION TO Rule 306	
Change in Transporter of:		IS OBTAINED	
Oil	<input type="checkbox"/>	Exp 2-115 expiration 2-1-75	
Casinghead Gas	<input type="checkbox"/>	2-12 6-6-75 ✓	
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.
Gissler "B"	13	Grayburg Jackson	State, Federal or Fee Federal	NM-2748
Location				
Unit Letter	M	660 Feet From The south Line and	660 Feet From The west	
Line of Section	8	Township	17S	Range 30E, 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 Crude Oil Purchasing Co.	Box #175, Artesia, New Mexico 88210					
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)					
Pending						
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	M	8	17	30	No	Under consideration

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 Res'v.	Diff. Res'v.
	X		X					
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
3-29-74	4-19-74		2870		2865			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
3671 KB	Grayburg-San Andres		2674		2642			
Perforations					Depth Casing Shoe			
2778-82, 2674-80 and 2845-50					2870			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4	8-5/8" O.D.		475'		200 sx. Class H			
7-7/8"	4 1/2" O.D.		2870'		210 sx. Class "C"			

## 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.)	
4-19-74	11-25-74	Pumping	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hrs.			
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
	30	20 (load)	Not measured.

### 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.

Ralph L Gray  
(Signature)

Consulting Engineer  
(Title)

Nov. 25, 1974  
(Date)

OIL CONSERVATION COMMISSION

DEC 5 1974

APPROVED

BY

W. A. Gussert  
OIL AND GAS INSPECTOR

TITLE

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 tested wells.