

DISTRIBUTION		5
ANTAFE		1
ILE		1
S.G.S.		
AND OFFICE		
TRANSPORTER	OIL	1
	GAS	1
OPERATOR		1
PRORATION OFFICE		

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-11
Effective 1-1-65

RECEIVED

OCT 24 1974

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)
New Well ☒ Change in Transporter of: ☐
Recompletion ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain)

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 "A"	31	Grayburg-Jackson & San Andres	State, Federal or Fee Fed	LC-028793-a
Location Unit Letter I 1650 Feet From The South Line and 760 Feet From The East Line of Section 19 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	North Freeman Ave. 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 Building Odessa, Texas 79760					
If well produces oil or liquids give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	E	19	17-S	30-E	Yes	October 8, 1974

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 <input checked="" type="checkbox"/> Gas well <input type="checkbox"/> New Well <input checked="" type="checkbox"/> Workover <input type="checkbox"/> Deepen <input type="checkbox"/> Plug Back <input type="checkbox"/> Same Res'ty. <input type="checkbox"/> Diff. Res'ty. <input type="checkbox"/>		
Date Spudded September 5, 1974	Date Comp. Ready to Prod. October 8, 1974	Total Depth 3410'	F.B.T.D. 3404'
Elevations (DF, RKB, RT, GR, etc.) 3612.9 GR	Name of Producing Formation Grayburg-Jackson	Top Oil/Gas Pay 2543'	Tubing Depth 3360'
Perforations 2543'-2550'; 2616'-2620'; 2662'-2666'; 2856'-2858'; 2924'-2932'; 3246'-3254'; 3283'-3290'; 3362'-3366'			Depth Casing Shoe 3410
TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-1/4"	8-5/8" 20#	495' KB	100
7-7/8"	4-1/2" 10.5#	3410' KB	600

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 October 9, 1974	Date of Test October 12, 1974	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hours	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test 105 Bbls.	Oil-Bbls. 55	Water-Bbls. 50 BLW	Gas-MCF 80

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.

Roy Crow
District Superintendent
October 23, 1974

OIL CONSERVATION COMMISSION
OCT 25 1974
APPROVED
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.