	A Section	٠.		-			
	15 1	NEW ME	XICO OIL C	ONSERVATION COMM.	SION	From C 104	
	SANTA FE /			FOR ALLOWABLE	2014	Form C-104 Supersedes Old C-104	and C-110
•	FILE /-		WE WOLUT	AND		Effective 1-1-65	***************************************
	U.S.G.S.	AUTHORIZATION	ON TO TRA	NSPORT OIL AND N	ATHRAL GAS		
	LAND OFFICE			into our ole and it		er en	
	TRANSPORTER OIL / GAS /					野国(Mindel) Managaran	
	OPERATOR /]				SFP 4 1968	
1.	PRORATION OFFICE					arr o 100	
	Operator	V				A Section 1	
	Kewanee Oil C	ompany	······································			ARRESIA, DEFIC	t
		sa, Oklahoma 741	101				Ì
	Reason(s) for filing (Check proper box)			Other (Please	explain)	······································	
	New Well	Change in Transport	1		f Operator	and Lease Name	
	Recompletion	Oil	Dry Ga	F Former L	ease Name:	Reed Brainard	
	Change in Ownership	Casinghead Gas	Conden	sate			
	If change of ownership give name pand address of previous owner	ormer Operator:	Mobil 0	il Company, $\widehat{\mathscr{P}}$. S	Bey 633	midland &	tex.
TT	DESCRIPTION OF WELL AND A	LEAGE				,	79701
	DESCRIPTION OF WELL AND I	Well No. Pool Name	, Including Fo	ormation	Kind of Lease	1.0	ase No.
	Atoka San Andres Unit Tr	.7 2 Atol	ka (SA)		State, Federal or F		
	Location		`				
	Unit Letter P; 660	Feet From The	South Line	and 660	_ Feet From The _	East	
	Line of Section Tow	mahip 18S	Range	26E , NMPM,	Eddy		County
				7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7			<u> </u>
III.	DESIGNATION OF TRANSPORT Name of Authorized Transporter of Oil	TER OF OIL AND NA		S Address (Cine address to	a subject appropriate	opy of this form is to be se	
	Continental Pipe Line C	_		n. Frieman	Artesia N	ew Mexico 202	2/C)
	Name of Authorized Transporter of Cas		Gas 🗀	Address (Give address to	which approved c	opy of this form is to be se	ent)
	Phillips Petroleum Comp	any		Phillips Building, Odessa, Texas 79760			. 1
	If well produces oil or liquids,	Unit Sec. Twp.		Is and deturily connected		·	
		10 & P 11 18	8s 26E	Yes	j Au	gust,/,1960	
	If this production is commingled with	h that from any other le	ase or pool,	give commingling order	number:		
	COMPLETION DATA	Oil Well	Gas Well				
	Designate Type of Completion	n - (X)	Ggs Mett	New Well Workover	Deepen Par	ng Back 'Same Res'v. Di	ff. Resfy.
	Date Spudded	Date Compl. Ready to Pro	od.	Total Depth	P.1	B.T.D.	
				-	1		
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Forms	rtion	Top Oil/Gas Pay	Tu	bing Depth	
	Perforations	L		<u> </u>	De	oth Casing Shoe	
						0	l
		TUBING, CASING, AND CEMENTING RECORD					
	HOLE SIZE	CASING & TUBIN	G SIZE	DEPTH SE	T	SACKS CEMENT	
						······································	
							
							
V.	TEST DATA AND REQUEST FO	DR ALLOWABLE (T	est must be af ble for this de	l ter recovery of total volum pth or be for full 24 hows)	ne of load oil and n	nust be equal to or exceed	top allow-
	OII. WELL Date First New Oil Run To Tanks	Date of Test	yer maa we	Producing Method (Flow,)	
	Length of Test	Tubing Pressure		Casing Pressure	Ch	oke Size	
		1					

OIL WELL	able for sime depth of de for fatt 24 fibrille)			
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)		
Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
Actual Prod. During Test	Oil-Bbis.	Water - Bbis.	Gas-MCF	

_			
G	AS.	WEL	I.

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
Testing Method (pitot, back pr.)	Tubing Pressure (ghut-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.

 7/		2 fr	М.	М.	Tharp	
	(Signature) ief Cler	k				_
	(Title)	1968				-

(Date)

OIL CONSERVATION COMMISSION

APPROVI	ED	1	, 19	
BY	W.a.	Gresse	XX	
TITLE	किए १६० में			

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or despended 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