

NO. OF COPIES RECEIVED		5
DISTRIBUTION		
SANTA FE	1	
FILE	1-	
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	/
	GAS	/
OPERATOR		
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-110
Effective 1-1-65

RECEIVED

SEP 7 1965

Operator Kewanee Oil Company		M. C. C. ARTESIA OFFICE	
Address P.O. Box 3786, Odessa, Texas			
Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well <input type="checkbox"/>	Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	Change of Lease Name (Formerly Leavitt Lease)	
Recompletion <input type="checkbox"/>			
Change in Ownership <input type="checkbox"/>			

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Atoka Grayburg Unit - Tract 2	Well No. 12	Pool Name, Including Formation Atoka, Grayburg	Kind of Lease State, Federal or Fee Fee
Location Unit Letter D ; 990 Feet From The North Line and 990 Feet From The West Line of Section 13 , Township 18S Range 26E , 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"/> Continental Pipe Line Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 367, Artesia, New Mexico		
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips Petroleum Company	Address (Give address to which approved copy of this form is to be sent) Phillips Building, Odessa, Texas		
If well produces oil or liquids, give location of tanks.	Unit E	Sec. 13	Twp. 18S
		Rge. 26E	Is gas actually connected? Yes
			When -

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)	X	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Restv.	Diff. Restv.
Date Spudded 1-15-61	Date Compl. Ready to Prod. 3-2-61	Total Depth 978		F.B.T.D. -					
Pool Atoka Grayburg	Name of Producing Formation Grayburg	Top Oil/Gas Pay 967		Tubing Depth 972					
Perforations				Depth Casing Shoe 960					
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE 8-3/4"	CASING & TUBING SIZE 7"		DEPTH SET 960		SACKS CEMENT 250				
	2-3/8"		972						

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.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

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

Division Clerk
(Title)

September 3, 1965
(Date)

OIL CONSERVATION COMMISSION

APPROVED **SEP 7 1965**, 19

BY **ML Armstrong**
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 Sections I, II, III, and VI only 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.