NO. OF COPIES RECEIVED				
NO. OF COPIES RECEIVED			-5	
DISTRIBUTION				
SANTA FE				
FILE			_	
U.S.G.S.				
LAND OFFICE				
TRANSPORTER	OIL			
	GAS	/		
OPERATOR				
PRORATION OFFICE				
Operator				

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-104

SANTA FE /	1	FOR ALLOWABLE AND	Supersedes Old C-104 and C-11 Effective 1-1-65
U.S.G.S.	AUTHORIZATION TO TRA	ANSPORT OIL AND NATURAL G	AS
LAND OFFICE OIL /	-		to return to
TRANSPORTER GAS /			J UN 20 X
OPERATOR /			; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;
I. PRORATION OFFICE Operator			- 6 Religion de la constante d
Kewanee 011 Con	mpany /		
P. O. Box 2239	, Tulsa, Oklahoma 74101		
Reason(s) for filing (Check proper bo	(x)	Other (Please explain)	
New Well Recompletion	Change in Transporter of: Oil XX Dry Ga	ıs 🔲	
Change in Ownership	Casinghead Gas Conder	nsate	
If change of ownership give name			
and address of previous owner			
II. DESCRIPTION OF WELL AND	Well No. Pool Name, Including F	Cermation Kind of Lease	Lease No.
Atoka San Andres Unit T	1	State, Federal	
Location		220	No A b
Unit Letter;;	Feet From The West Lin	ne and 330 Feet From T	he North
Line of Section 13	ownship 18\$ Range	26E , NMPM, Eddy	County
II DECIONATION OF TRANSPOR	OTED OF OU AND NATURAL CA	16	
Name of Authorized Transporter of O	RTER OF OIL AND NATURAL GA	Address (Give address to which approv	
Name of Authorized Transporter of C	ny, Pipe Line Division	North Freeman Avenue, Al Address (Give address to which approv	rtesia, New Mexico 88210 ed copy of this form is to be sent)
Phillips Petroleum Co		P. O. Box 6666, Odessa,	<u>.</u>
If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected? Whe	n
give location of tanks.	E 13 185 26E		March, 1960
If this production is commingled w V. COMPLETION DATA	with that from any other lease or pool,		
Designate Type of Complet	ion - (X)	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
		Top Oil/Gas Pay	Tubing Depth
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top On/Gds Puy	Tubing Deptin
Perforations			Depth Casing Shoe
	TUBING, CASING, AN	D CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
V. TEST DATA AND REQUEST 1 OIL WELL	FOR ALLOWABLE (Test must be a able for this de	after recovery of total volume of load oil a epth or be for full 24 hours)	
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas life	t, etc.)
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
			Ggs - MCF
Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	Gua-Wor
		<u> </u>	
GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls, Condensate/MMCF	Gravity of Condensate
Actual Prod. 1681-MCF/D	Length of Feet		
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
UL CORRECTOR OF COMPLET	NCE	OII CONSERVA	TION COMMISSION
VI. CERTIFICATE OF COMPLIA	NCE	JUN 2	7 10 co
I hereby certify that the rules and	d regulations of the Oil Conservation with and that the information given		1130 y 19
above is true and complete to t	he best of my knowledge and belief.	BY W. C. STREET	SAS INSPECTOR
	2	TITLE	
- 72 122 W	· /· · · · · · ·	This form is to be filed in c	compliance with RULE 1104.
11/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1	engence)	If this is a request for allow well, this form must be accompanied	able for a newly drilled or deepene nied by a tabulation of the deviatio dance with RULE 111.
, -	lef Clerk	tests taken on the well in accordant	dence with RULE 111. It be filled out completely for allow
(Title)		All sections of this form must be filled out completely for allowable on new and recompleted wells.	

June 24, 1969 (Date)

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.