NO. OF COPIES RECEIVED			
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FILE		/-	
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL	1	
	GAS	17_	
OPERATOR			
PRORATION OFFICE			

## NEW MEXICO OIL CONSERVATION COMMISS REQUEST FOR ALLOWABLE AND

Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65

U.S.G.S.  LAND OFFICE	AUTHORIZATION TO	TRANSPORT OIL AND NATUR	AL GAS RECEIVED		
OPERATOR GAS /  OPERATOR /  PRORATION OFFICE		CHANGE	FEB 1 0 1966		
Operator	0/1 0				
Address	Oil Company	)K. j	ARTESIA, OFFICE		
	Hobbs, New Mexico				
Reason(s) for filing (Check proper box	Change in Transporter of:	Other (Please explain			
New Well Recompletion	· · · · · · · · · · · · · · · · · · ·	197   1	tesia letter 2-1-66		
Change in Ownership	Casinghead Gas	Condensate dereting L	ee Drilling Company		
of change of ownership give name and address of previous owner					
DESCRIPTION OF WELL AND	LEASE		Kind of Lease		
Andrew Arnquist Es	st. Well No. P	ool Name, Including Formation Atoka Penn	State, Federal or Fee Patented		
Location Unit Letter F ; 16	550 Feet From The nort	h Line and 1650 Feet	From The west		
Line of Section 29	ownship 18S Rand	ge 26E , <sub>NMPM</sub> ,	Eddy County		
DESIGNATION OF TRANSPOR Name of Authorized Transporter of Ol	TER OF OIL AND NATURA	AL GAS   Address (Give address to which	approved copy of this form is to be sent)		
None Permis	n Corp. Fession [L.1.9]		approved copy of this form is to be sent)		
Transwestern Pipeline		Box 1502 Houston  ge. Is gas actually connected?	When		
If well produces oil or liquids, give location of tanks.		yes	2-1-61		
If this production is commingled w	ith that from any other lease or	pool, give commingling order numbe	r:		
Designate Type of Completi	Oil Well Gas	Well New Well Workover Deep	en Plug Back   Same Res'v. Diff. Res'		
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth		
Pool	Name of Producing Formation	10p On/ Ods 1 47			
Perforations			Depth Casing Shoe		
	TUBING, CASIN	G, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZ	E DEPTH SET	SACKS CEMENT		
TEST DATA AND REQUEST FOIL WELL	FOR ALLOWABLE (Test mu able for	ust be after recovery of total volume of lo this depth or be for full 24 howrs)	ad oil and must be equal to or exceed top allo		
Date First New Oil Run To Tanks	Date of Test Producing Method (Flow, pump, gas lift, etc.)		gas lift, etc.)		
Length of Test	Tubing Pressure	Casing 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		
CERTIFICATE OF COMPLIAN	vCE	OIL CONSE	ERVATION COMMISSION		
I hereby certify that the rules and	regulations of the Oil Conserv	APPROVED FEB 1	0 1966 , 19		
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.  APPROVED  APPROVED  BY  TITLE  TOTAL OF THE OFFICE OFFI		Strong			
			TITLE ADD BAS NOSEMBLE		
		This form is to be file	This form is to be filed in compliance with RULE 1104.		

(Sign ture)

Area Supt.

(Title) 2-7-66

(Date)

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.