				- ~			
	OF COPIES MECEIVED	7					
	DISTRIBUTION	NEW MEXICO OIL CONSERVATION COMMISSION					
	SANTA FE /		FOR ALLOWABLE		Form C=104 Supersedes Ob	d C-104 and C-110	
	FILE /_		AND		Effective 1-1-6		
	LAND OFFICE AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS RECEIVED						
	IDAMORDOTES OIL /!						
	GAS	_	RECEI	VED	0 0 10	ee.	
_	PROPATION OFFICE				AUG 2 9 19	00	
1.	Operator		SEP 2	1966	<u>o, c. c.</u>		
	Fred Tool	riding do namy		_	ARTESIA, OFF	ICE.	
	Address		D. C.				
	Reason(s) for filing (Check proper box) Other (Please explain)						
	New Well Change in Transporter of:						
	Recompletion Oil Dry Gas						
	Change in Ownership Casinghead Gas Condensate						
	If change of ownership give name and address of previous owner	G. Molly Stock area	sio bil				
II.	DESCRIPTION OF WELL AND LEASE						
	Lease Name	Well No. Pool Name, Including F	ormation	Kind of Leas		Lease No.	
	Lary - State	1 Artoria		State, Feder	al cr Fee	6.8	
		30 Feet From The 3 Lir	on and	F F	Th 21	·	
	Line of Section 2	wr.ship 188 Range 2	7R , NMP	M, Edd;	y	County	
II.	DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL GA				-	
	Name of Authorized Transporter of Oil or Condensate Address (Give address to which approved copy of this form is to be sent)						
	Convince Authorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent)						
	a land to the sense of the sens						
	If well produces oil or liquids, Unit Sec. Twp. Rge. Is gas actually connected? When						
	give location of tanks. 185 275 10						
	If this production is commingled wincompletion DATA	ith that from any other lease or pool,	give commingling ord	er number:	-		
٠.		Oil Well Gas Well	New Well Workover	Deepen	Plug Back Same Res	v. Diff. Restv.	
	Designate Type of Completi	Date Compl. Ready to Prod.	Total Depth	İ			
	Date Spudded (-30-51		Total Depth		P.B.T.D.	ĺ	
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	•	Tubing Depth		
	3506 ft.		1956 £t.		2011 617		
	Perforations Open 2016		1777/100		Depth Casing shot		
	TUBING, CASING, AND CEMENTING RECORD						
	HOLE SIZE	CASING & TUBING SIZE	DEPTH S		SACKS CEM	IENT	
	10"	÷ 5/8	1,86		50		
					1.		
V.	TEST DATA AND REQUEST FOIL WELL	OR ALLOWABLE (Test must be a able for this de	fter recovery of total voi pth or be for full 24 hou	lume of load oil rs)	and must be equal to or e	exceed top allow-	
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flo		ift, etc.)		
	Length of Test	Tubing Pressure	Casing Pressure		Choke Size		
	Langtin Cr. 1 aut	Tabling 1 1000 at c	Cashing 1 1000 and		OORG GIZG		
	Actual Prod. During Test	Oil - Bbls.	Water-Bbls.		Gas - MCF		
	GAS WELL				. 		
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MM	CF	Gravity of Condensate		
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shu	t-in)	Choke Size		
		<u> </u>					
1.	CERTIFICATE OF COMPLIANCE			OIL CONSERVATION COMMISSION			
	I hereby contify that the rules and regulations of the Oil Consequation		APPROVED SEP 2 1966				
	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.		ex Wa kressett				
	above is true and complete to th	e best of my knowledge and belief.	619 RS	YD GAS INSP			
	\bigcirc		TITLE	eri Grad in Al-			

Giner

(Title) 24, **1**966

(Date)

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