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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

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Operator Cities Service Oil Company		JUL 14 1965
Address Box 69 - Hobbs, New Mexico		O. C. C. ARTESIA, OFFICE
Reason(s) for filing (Check proper box) New Well <input type="checkbox"/> Recompletion <input type="checkbox"/> Change in Ownership <input checked="" type="checkbox"/>		Other (Please explain) Change in Well Name from Well No. 1 to Well "A" No. 1
If change of ownership give name and address of previous owner Carper Drilling Co. - Artesia, New Mexico		

Lease Name Well "A"	Well No. 1	Pool Name, Including Formation Artesia (Queen S.A.)	Kind of Lease State, Federal or Fee Fee
Location Unit Letter M ; 400 Feet From The South Line and 330 Feet From The West Line of Section 8 , Township 18S Range 28E , NMPM, Eddy County			

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Continental Pipeline Co.		Address (Give address to which approved copy of this form is to be sent) Artesia, New Mexico	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips Petroleum Co.		Address (Give address to which approved copy of this form is to be sent) P.O. Box 6666, Odessa, Texas	
If well produces oil or liquids, give location of tanks.	Unit M	Sec. 8	Twp. 18S
		Rge. 28E	Is gas actually connected? yes

If this production is commingled with that from any other lease or pool, give commingling order number:

Designate Type of Completion - (X)		Oil Well	Gas Well	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.				
Pool	Name of Producing Formation	Top Oil/Gas Pay			Tubing Depth				
Perforations					Depth Casing Shoe				
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE		CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			

Date First New Oil Run To Tanks		Date of Test		Producing Method (Flow, pump, gas lift, etc.)	
Length of Test		Tubing Pressure		Casing Pressure	
Actual Prod. During Test		Oil - Bbls.		Water - Bbls.	
				Gas - MCF	

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. Robertson (Signature) District Clerk (Title) July 8, 1965 (Date)		OIL CONSERVATION COMMISSION APPROVED JUL 14 1965 , 19_____ BY McArmstrong TITLE Oil and Gas Inspector 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.	
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