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	HO. OF COPIES RECEIVED L.	7		
	DISTRIBUTION	NEW MEXICO OIL C	ONSERVATION COMMISSION	
	SANTA FE		FOR ALLOWABLE	Form C-104 Supersedes Old C-104 and C-11
	FILE		AND	ECET'VED
	u.s.g.s.	AUTHORIZATION TO TRA	ANSPORT OIL AND NATURAL O	
	LAND OFFICE	_		
	TRANSPORTER GAS	-		DEC 3 1974
	OPERATOR	<del>-</del>	•	a. c. c.
1.	Operator Operator			ARTESIA, SPRICE
	Gene	A. Snow		
	Address 606	So. 13th. Lov:	Naton N.M. 8	8260
	Reason(s) for filing (Check proper box		Other (Please explain)	
	New Well	Change in Transporter of:	CASINGHEAD G	AS MUST NOT BE
	Recompletion	Oil Dry Ga	FLARED AFTER	2-1-75
	Change in Ownership	Casinghead Gas Conder	UNIES AN EX	
	If change of ownership give name	. 2 10-26		77 206
	and address of previous owner	05171 3-10-16	1	
		LEASE South Jow Hells	C-36-5A	
H.	DESCRIPTION OF WELL AND Lease Name	Well No. Popi Name, Including F		Lease No.
	Alscott	1 Hand Dugget		or Foo Federal NM-0924
	Location	JACK STORPE	0.0 - 00N /NO.	TOURTED NIVE - UTSAT
	Unit Letter I : 1752	, 3 Feet From The S Lin	e and 460 Feet From T	<u>د</u>
	2)		SAS SI	,
	Line of Section 3 Tow	mship 188 Range 2	192 , NMPM, COC	County
III.	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA	s	•
	Name of Authorized Transporter of Oil		Address (Give address to which approv	ed copy of this form is to be sent)
	Mavaio Crude	Oil Purchasing	N. Freeman . P.O.B	ox 175. Artesia N.M.
	Name of Author! Od Transporter of Cas	inghead Gas or Dry Gas	Address (Give address to which approv	ed copy of this form is to be sent)
	If well produces oil or liquids,	Unit Sec. Twp. Pge.	Is gas actually connected? Whe	n
	give location of tanks.	<u> </u>	NO	1
	If this production is commingled with that from any other lease or pool, give commingling order number:  COMPLETION DATA			
7 4 .		Oil Well Gas Well	New Well Workover Deepen	Plug Back   Same Restv. Diff. Restv.
:	Designate Type of Completion	n - (X)	X	
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D. 2856
	6-25-1914	6-28-1974	2873	
	Elevations (DF, RKB, RT, GR, etc.) 3415 D. F.	Name of Producing Formation  Queen - Grybury - S.A.	Top Oil/Gas Pay	Tubing Depth 2767
	3415 D.F.	Croser - Gid 0019 - 2.1.	1051	Depth Casing Shoe
		126-2568 76 holes:	2813-38 38 holes	2873
	1854 41 201100		CEMENTING RECORD	
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
i	10"	85/8	446	50
	7 1/8	41/2	2,813	250
		0.8/0	0.5/.5	-
		23/8	2767	
	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 allowed able for this depth or be for full 24 hours)			
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas life	i, esc.)
	7-9-74	7-30-74	Pump.	<u>/ X</u>
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size
	24 Ms	TUMP.	30 PSI	Gas-MCF
	Actual Prod. During Test	OII-Bbls. 4	Water-Bbls.	TSTM.
Ì		T	120	
	Cic wei i			

Actual Prod. Test-MCF/D

Length of Test

Bbls. Condensate/MMCF

Gravity of Condensate

Testing Method (pitot, back pr.)

Tubing Pressure (Shut-in)

Casing Pressure (Shut-in)

Choke Size

## VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been compiled with and that the information given above is true and complete to the best of my knowledge and belief.

bove is true and complete to the best of my knowledge and belief.
A. n. A.
Leve A. Dur
(Signature)
11-28-1914 (Title)
(Date)

OIL CONSERVATION COMMISSION

BY 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 only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.