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-	NO. OF COPIES RECEIVED	5	_			
	DISTRIBUTION		NEW MEXICO OIL CONSERVATION COMMISSION Form C-104			
	SANTA FE	1/-	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-116 Effective 1-1-65	
-	FILE	1		AND PARTIES AND MATURAL	RECEIVED	
}	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS					
	TRANSPORTER OIL	7			OCT 1 styren	
	GAS	2			; ************************************	
	PRORATION OFFICE	12			ARTEDIA	
I.	Operator	L				
	Robert H. Birdwell					
	559 The Main Bldg., Houston, Texas 77002					
	Reason(s) for filing (Check)			Other (Please explain)		
	New Well		Change in Transporter of:		<i>a</i> 1	
	New Well Change in Transporter of: Recompletion Dry Gas from Continental					
ļ	Change in Ownership Casinghead Gas Condensate					
,	f change of ownership give name Quasar, Incorporated, P.O. Box 266, Evansville, Indiana					
	and address of previous ov	vner				
II.	ESCRIPTION OF WELL AND LEASE Lease Name Well No. Pool Name, Including Formation Kind of Lease Lease No.					
	Featherstone		2 Turkey Track	Queen Grayburg Statk Feder	акжие NM 010907-A	
	Location					
	Unit Letter G : 1650 Feet From The North Line and 2310 Feet From The East					
	Line of Section 34 Township 18 Range 29 , NMPM, Eddy County					
***	DESIGNATION OF TRA	NSPORT	FER OF OIL AND NATURAL GA	\s		
111.	Name of Authorized Transpo	DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil or Condensate Address (Give address to which approved copy of this form is to be sent)				
	Navajo Refg.	Co., 1	Pipeline Division	N. Freeman Ave., Arte	sia, New Mexico	
	Name of Authorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent)					
	None					
	If well produces oil or liquid	15 66	Unit Sec. Twp. Rge.	Is gas actually connected?	hen	
	give location of tanks.	712	K 34 16 25	No		
	If this production is commingled with that from any other lease or pool, give commingling order number:					
IV.	COMPLETION DATA Oil Well Gas Well New Well Workover Deepen Plug Back Same Res'v. Diff. Res'v.					
	Designate Type of C	Completio				
	Date Spudded		Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
	Elevations (DF, RKB, RT,	GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
					D. U. Grate Shape	
	Perforations				Depth Casing Shoe	
	TUBING, CASING, AND CEMENTING RECORD					
				DEPTH SET	SACKS CEMENT	
	HOLE SIZE		CASING & TUBING SIZE	DEFINSE	3/3//3/2	
			<u> </u>			
u ./	TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this death or he for full 24 hours)					
٧.	OIL WELL 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	lift, etc.)	
					Choke Size	
	Length of Test		Tubing Pressure	Casing Pressure	Chicke Sills	
				Water - Bbls.	Gas - MCF	
	Actual Prod. During Test		Oil-Bbls.	1,2101		
	GAS WELL Actual Prod. Test-MCF/D		Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
	Actual Prod. 1981-MCF/D					
	Testing Method (pitot, bac	k pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
	. coming interior (based one.					
₩7=	CERTIFICATE OF COMPLIANCE			OIL CONSERV	ATION COMMISSION	
VI	CERTIFICATE OF COMPLIANCE					
	I harahu nastifu that the	rules and	regulations of the Oil Conservation	APPROVED	BY W. a. Gressett	
	a lasta basa basa s	namaliad :	with and that the midricalion kives	W. a. M.	esset	
	above is true and complete to the best of my knowledge and belief.					

Sudwell (Signature)

Owner

October 10, 1969

(Title)

(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.

This form is to be filed in compliance with RULE 1104.

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.