NO. OF COPIES RECEIVED		5		<u> </u>						n of H named a	noitaivation	
DISTRIBUTION SANTA FE				NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE						Form C+104 had by for allow- Supersedes Old C-104 and C-110		
FILE		-	PF	CE	I A E D	AND	LOWABLE		Eile	ctive 1-1-65	in the Same S.	
U.S.G.S.					ATION TO TR		OIL AND NA	ATURAL GA	S		• •	
LAND OFFICE	OIL	1.	I	AN 5	1973			,		٠	,	
TRANSPORTER	GAS	1		711V)	1370			•				
OPERATOR		1		o. C	. C .						×.	
PRORATION OF	FICE		Al	RTESIA,			······································	· · · · · · · · · · · · · · · · · · ·				
•	adina	. .	Patron Odl	and C	aa Comnany	✓						
Address	aurng	<u> </u>	sates UII	and G	as Company	···		 			 ;	
81	0 N.	Dixi	e Blvd.,	Room	202 , Odessa	, Texas	79761					
Reason(s) for filing New Well	(Check)	proper		naa In Taa			Other (Please e	_{xplain)} f Operato	m Wama	A 66 - 26 - 1		
Recompletion	H		Oil	nge in Tru	nsporter of:	Gas 🗍		1, 1973 f				
Change in Ownershi	р		Cas	inghead Go	zs Cond	ensate						
If change of owners	ship giv	e nam	е									
and address of prev										·		
DESCRIPTION O	e wet	Y AN	IN I FACE			•	•					
Lease Name	T HELL	ALL PL		l No. Poo	Name, Including	Formation	ŀ	ind of Lease		ì	Locus No.	
Simms-Feder	ral			2 No	orth ^B enson	Queen C	rayburg s	tate, Federal o	Fee Fe	ederal	LC028975-	
Location	_		7.650				1000				1	
Unit Letter	F	. ;	1650 Fee	et From Th	• North L	ine and	1980	Feet From The	·We	est	 [
Line of Section	34		Township	18S	Range	30E	, ММРМ,		Eddy		County,	
											,	
DESIGNATION O				or Conde		Address	(Give address to	which approved	copy of th	is form is to	be sent) .	
Texas-New 1	-		<u> </u>					_		_		
'Name of Authorized	Transpo	rter of	Casinghead G	as X	or Dry Gas		Box 1510, Midland, Texas 79 Address (Give address to which approved copy				od sent)	
Phillips Pe	etrol	eum				سبكبروساء فط قطبين وارجب	Building,		ille, ()klahoma	74004	
If well produces oil		is,	Unit	•	Twp. Rge. 18S 30E	is gas ac	Is gas actually connected? When			<i>c</i> 1		
give location of tank			C				Yes		12-5-6	21		
If this production in COMPLETION D		ingled	with that ire	om any oti	ner lease or pool	., give com	mingling order i					
Designate Ty	ne of C	ompl	etion - (X)	Oil We	Gas Well	New Well	Workover	Deepen 1	Plug Back	Same Res'v	7. Diff. Res'v.	
Date Spudded			mpl. Ready	to Prod.	Total De	pth		P.B.T.D.				
				•								
Elevations (DF, RKB, RT, GR, etc.)			Name of	Producing	Formation	Top Oil/	Top Oil/Gas Pay			Tubing Depth		
									Depth Casing Shoe			
Perforations									, , , , , , , , , , , , , , , , , , ,	.,		
				TUBI	NG, CASING, AI	ND CEMEN	CEMENTING RECORD					
HOLE SIZE			CA	SING & T	UBING SIZE		DEPTH SET			SACKS CEMENT		
TEST DATA AN	D REQ	UEST	FOR ALL	OWABLE			ry of total volum or full 24 hours)	e of load oil an	i must be e	qual to or ex	ceed top allow-	
OIL WELL Date First New Oil	Run To	Tanks	Date of	Test	able for this		g Method (Flow,	pump, gas lift,	esc.)			
Length of Test			Tubing 1	Pressure		Casing F	Casing Pressure			Choke Size		
Actual Prod. During	Tast		Oil-Bbl			Water - B	bls.		Gas - MCF			
Actual Prod. During			022.									
I			<u></u>				<u></u>	· · · · · · · · · · · · · · · · · · ·				
GAS WELL						1511- 6	1 00.00			~		
Actual Prod. Test-MCF/D			Length (ot Test		Bbis. Co	Bbls. Condensate/MMCF			Gravity of Condensate		
Testing Method (pit	ot, back	pr.)	Tubing 1	ressure (Shut-in)	Casing F	ressure (Shuc-	in)	Choke Size			
CERTIFICATE (OF CO	MPLI	ANCE				OIL C	ONSERVAT	ION CON	MISSION		
				•	01.5	ADDE	OVED FE	B 1 4 197	3	1	9	
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given							APPROVED 19					
above is true and	comple	ete to	the best of	my know	ledge and belief	· BY	Mel	1, Stol				
•						TITL	E OIL AND GA	S INSPECTO				
12.07							This form is to be filed in compliance with RULE 170%.					
March Barrer							If this is a request for allowable for a newly drilled or despendent well, this form must be accompanied by a to be the despendent					
Production Superintendent							tests taken on the well in accordance when the second					
(Title)							All sections of this form must be filled out congretely for all sole on new and recompleted wells.					

January 3, 1973

(Date)

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.