## NE MEXICO OIL CONSERVATION COM .SSION Santa Fe, New Mexico

(Form C-104) Revised 7/1/57

## REQUEST FOR (OIL) - (GAS) ALLOWABLE

New Well Recompletion

This form shall be submitted by the operator before an initial allowable will be assigned to any completed Oil or Gas well. Form C-104 is to be submitted in QUADRUPLICATE to the same District Office to which Form C-101 was sent. The allowable will be assigned effective 7:00 A.M. on date of completion or recompletion, provided this form is filed during calendar month of completion or recompletion. The completion date shall be that date in the case of an oil well when new out is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit. June 10th Artesia, N.M. (Place) (Date) WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS: Graridge Corporation - Resier Xates St Well No...317 in WW-HE-EV /4, (Company or Operator) Elevation 3867 6 1 ... Total Depth 2400 PBTD 2300 Please indicate location: Name of Prod. Form Premier Top Oil/Gas Pay 2346 D À PRODUCING INTERVAL -Perforations\_ Depth H E Open Hole\_\_ Casing Shoe OIL WELL TEST -K I L J Natural Prod. Test: bbls.oil, bbls water in hrs, min. Size Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of M N bbls water in hrs, min. Size GAS WELL TEST -MCF/Day; Hours flowed \_\_\_\_Choke Size\_\_\_ Natural Prod. Test:\_\_\_ Tubing Casing and Cementing Record Method of Testing (pitot, back pressure, etc.):\_\_\_\_ Feet SAT Size MCF/Day; Hours flowed\_ Test After Acid or Fracture Treatment:\_ Method of Testing: Choke Size **I50** Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and 2397 150 Date first new Date First new Casing Press oil run to tanks 6-9-63 2-3/8 2340 Press. Continental Pipeline Company Oil Transporter Gas Transporter\_

I hereby certify that the information given above is true and complete to the best of my knowledge ARTESIA, OFFICE

Approved.

OIL CONSERVATION COMMISSION

OIL CONSERVATION COMMISSION

By:

Title

Bist.Supt.

Send Communications regarding well to:

Gravidge Corporation

Name.

Drawer B Artesia.N.M.

Address.

## NUMBER OF COPIES RECEIVED

## NEW MEXICO OIL CONSERVATION \_\_MMISSION SANTA FE, NEW MEXICO

FORM C-110 (Rev. 7-60)

TRANSPORTER GAS	/		CERTIFICATE OF COMPLIANCE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS								
PRORATION OFFICE OPERATOR	3	-					APPROPRIATE OFF	ICE			
Company or Operato	or	*	ORTONIA	AND 7 C	Of its min.		Lease	ICL	Wel	li No.	
	iraridge (	Corporatio	<u></u>				Resler Yate	s St.		317	
Unit Letter	Section	tion Township Range					County			# · · · · · · · · · · · · · · · · · · ·	
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P001	Kind of Lease (State, Fed Fee)										
	produces oil or congive location of tan		Unit Le	er	Segi	n •	Township	Range	° 28 ]	3	
Authorized transpor	rter of oil or	condensate			Address (give	addr	ress to which approved co	ppy of this fo	orm is to	be sent)	
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Authorized transpor	of casing hear	d gas or dry ga	as Date	e Con-	<del></del>		ress to which approved co	ony of this for	orm is to l	be sent)	
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If gas is not being	sold, give reasons	s and also explain i	its present di	sposition:	l						
New well, not Commercial.											
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	New Well .	• • • • • • • • • • • • • • • • • • • •		. 🗔	Change in O	wners	ship	REC	EIV	/ E D	
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	Casing n	head gas . 🗂 Co	Condensate								
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								A. C	721/ ·		
Domosko											
Remarks											
The undersigned	certifies that the	e Rules and Regu	lations of t	he Oil Co	nservation Co	ommi:	ssion have been compl	ied with.	<del></del>		
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	Execute	d this the	th day of_	<del></del>			_ , 19 <b>63</b> .				
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Date					Address				<del></del>		
		Drawer B ,Artesia, New Mexico									