NO. OF COPIES RECEIVED			
DISTRIBUTION SANTA FE		CONSERVATION COMMISSION	Form C-104 Supersedes Old C-104 and C-11
	REQUES	ST FOR ALLOWABLE	Effective 1-1-65
U.S.G.S.	AUTHODIZATION TO T	AND RANSPORT OIL AND NATURAI	GAS
LAND OFFICE	AUTHURIZATION TO T	RANSPORT OIL AND NATURAL	RECEIVED
OIL /			,
TRANSPORTER GAS /			
OPERATOR /			FEB 10 1988
PROPATION OFFICE	-		
Operator	/		And the second
Kewanee Oil Company			ARTEBUL, FEOL
P. 0. Box 3776, Odess		Other (Please explain)	
Reason(s) for filing (Check proper be	Ox) Change in Transporter of:	, ,	to Transport Casinghead
New Well	,	Gas Gas.	oo ilangoor o oasanghead
Recompletion		ndensate das	
Change in Ownership	Cusinghed Gus Co.	idensate	
If change of ownership give name and address of previous owner			
DESCRIPTION OF WELL AN	D I FASE		
Lease Name	Lease No. Well No. Pool	Name, Including Formation	Kind of Lease
Fanning "A"	2 A	toka San Andres	State, Federal or Fee Fee
Location	1 50 / /		
_	Feet From The South	Line and 2310 Feet Fr	om The <u>East</u>
Line of Section 13	Cownship 135 Range	26E , NMPM, Ec	do County
	DEED OF OH AND NATURAL	CAS	
Name of Authorized Transporter of C	RTER OF OIL AND NATURAL or Condensate	Address (Give address to which ap	oproved copy of this form is to be sent)
Continental Pipe Line	e Company	P. O. Box 367. Arte	proved copy of this form is to be sent)
Name of Authorized Transporter of C	Casinghead Gas or Dry Gas	Address (Give address to which ap	oproved copy of this form is to be sent)
Phillips Petroleum Co	mpany	Phillips Building.	Odessa. Texas
If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected?	When
give location of tanks.	K 13 188 26	E Yes	February 8, 1966
If this production is commingled	with that from any other lease or po		
COMPLETION DATA	Oil Well Gas Wel		Plug Back Same Resty. Diff. Resty
Designate Type of Comple			1 1
	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Date Spudded			1908
10-10-65	10-29-65 Name of Producing Formation	1953 1 Top Cil/Gas Pay	Tubing Depth
Elevations (DF, RKB, RT, GR, etc.	San Andres	1681.	1706.651
3295 GR			
Perforations 1 jet @ 1681 1806 1807 1811 1	L829' & 2 1833'	1795', 1796', 1800', 180	1952.901
	TUBING, CASING,	AND CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
11"	8 -5/ 8"	1195.351	500
7-7/8"	5-1/2"	1952.901	450
	2-3/8 ⁿ	1706.65	
TEST DATA AND REQUEST	FOR ALLOWABLE (Test must	be after recovery of total volume of load	loil and must be equal to or exceed top allow
OIL WELL	able for thi	is depth or be for full 24 hours)	
Date First New Oil Bun To Tanks	Date of Test	Producing Method (Flow, pump, go	as lift, etc.)
			Louis State
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
			Gra VOE
Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	Gas - MCF
GAS WELL			Complete of Condensate
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
		Control Description	Choke Size
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Cuore 2126
CERTIFICATE OF COMPLY	ANCE	OIL CONSE	RVATION COMMISSION
. CERTIFICATE OF COMPLIANCE			
		APPROVED FEB 1 C) 1966 , 19
Commission have been complie	nd regulations of the Oil Conservat d with and that the information gi	ven WP (75.44)	Teams
Commission neve need combite	the best of my knowledge and beli	infilling /// Luruuu	LICUG

	1
	γ'
Man VI	teran
- July 11	(Signature)
(/	(508)100100
Division Clerk	
	(Title)

(Date)

February 8, 1966

APPROVED	, 19
By ML aruntrang	
THE ROLL SHEET WATER	

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.

Separate Forms C-104 must be filed for each pool in multiply completed wells.