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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

RECEIVED

CHANGE

APR 26 1966

Operator International-Yates		OK	D. R. C. ARTESIA, OFFICE
Address P. O. Box 427, Artesia, New Mexico			
Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:		
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/>	Dry Gas <input type="checkbox"/>	
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/>	Condensate <input type="checkbox"/>	

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Dunn B	Lease No.	Well No. 31	Pool Name, Including Formation Artesia	Kind of Lease State, Federal or Fee Federal
Location				
Unit Letter A	660	Feet From The North	Line and 1980	Feet From The East
Line of Section 11	Township 18-S	Range 28-E	, NMPM, Eddy County	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Continental Pipe Line Company	Artesia, New Mexico					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Phillips Petroleum Company	Odessa, Texas					
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 11	Twp. 18	Rge. 28	Is gas actually connected? Yes	When 3-12-65

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res ^{ty} .	Diff. Res ^{ty} .
Date Spudded 4-5-66	Date Compl. Ready to Prod. 4-13-66		Total Depth 2660'		P.B.T.D. 2654'			
Elevations (DF, RKB, RT, GR, etc.) 3646' (DF)	Name of Producing Formation Grayburg		Top Oil/Gas Pay 2568'		Tubing Depth 2620'			
Perforations 2568-2571' and 2616-2619'					Depth Casing Shoe 2660'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
11"	8 5/8"		462'		100			
7 7/8"	4 1/2"		2660'		175			

V. 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 allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks 4-21-66	Date of Test 4-26-66	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 Hour	Tubing Pressure ---	Casing Pressure ---	Choke Size ---
Actual Prod. During Test 82	Oil-Bbls. 77	Water-Bbls. 5	Gas-MCF NR

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size

VI. CERTIFICATE OF COMPLIANCE

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

Kenneth Lugsdale
(Signature)
District Production Foreman
(Title)
April 26, 1966
(Date)

OIL CONSERVATION COMMISSION

APPROVED **APR 27 1966**, 19
BY ML Armstrong
TITLE Oil Conservation

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.

OFFICE OF THE ATTORNEY GENERAL
STATE OF NEW YORK
ALBANY, N. Y.

IN SENATE

REPORT OF THE COMMISSIONER OF THE LAND OFFICE

FOR THE YEAR 1900

ALBANY: JAMES BRADY, STATE PRINTER, 1901.

RECEIVED JANUARY 10, 1901.

DATE	DESCRIPTION	AMOUNT
1900	LAND OFFICE	100.00
1900	LAND OFFICE	100.00
1900	LAND OFFICE	100.00
1900	LAND OFFICE	100.00
1900	LAND OFFICE	100.00
1900	LAND OFFICE	100.00
1900	LAND OFFICE	100.00
1900	LAND OFFICE	100.00
1900	LAND OFFICE	100.00
1900	LAND OFFICE	100.00

THE COMMISSIONER OF THE LAND OFFICE

James B. Tamm
COMMISSIONER

ALBANY, N. Y., JANUARY 10, 1901.

TO THE SENATE

James B. Tamm
COMMISSIONER

ALBANY, N. Y., JANUARY 10, 1901.