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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

NOV 18 1980

I. Operator American Petrofina Company of Texas J. C. D.
Address Box 1311, Big Spring, TX 79720 ARTESIA OFFICE
Reason(s) for filing (Check proper box) Other (Please explain)
New Well ☐ Change in Transporter of:
Recompletion ☒ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Resler Yates State	Well No., Port Name, Including Formation 344 Artesia (Q-G-SA)	Kind of Lease State, Federal or Fee State	Lease No. 647
Location Unit Letter P 660 Feet From The South Line and 660 Feet From The East Line of Section 29 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)		
Navajo Refining Co., Pipeline Division	North Freeman Ave., Artesia, NM 88210		
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)		
None			
If well produces oil or liquids, give location of tanks.	Unit C Sec. 28 Twp. 18-S Rge. 28-E	Is gas actually connected?	When
	LACT Unit	No	

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 <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v. <input type="checkbox"/>	Diff. Res'v. <input type="checkbox"/>
Date Spudded 08-25-80	Date Compl. Ready to Prod. 09-06-80		Total Depth 2066'		P.B.T.D. 2037'			
Elevations (DF, RKB, RT, GR, etc.) 3538.9 GL	Name of Producing Formation Grayburg		Top Oil Gas Pay 2010'		Tubing Depth 2010'			
Perforations 2010-2025'					Depth Casing Shoe 2066'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
11"	8-5/8"		544'		300 sx.			
7-7/8"	4-1/2"		2065'		200 sx.			
	2-3/8"		2010'					

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 10-13-80	Date of Test 11-17-80	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hrs.	Tubing Pressure -	Casing Pressure -	Choke Size 1
Actual Prod. During Test	Oil-Bbls. 6	Water-Bbls. 61	Gas-MCF (1)

GAS WELL

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

J. C. Chapman J. C. Chapman
(Signature)
Assistant District Mgr. of Production
(Title)
November 18, 1980
(Date)

OIL CONSERVATION COMMISSION

APPROVED NOV 20 1980
BY W. A. Gressett
TITLE SUPERVISOR, DISTRICT II

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.

