NEW MEXICO OIL CONSERVATION COMMISSION

POTENTIAL TEST AND REQUEST FOR ALLOWABLE

AN D/O R

CERTIFICATE OF COMPLIANCE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

• 1		·				11.1 4 10.77
Operator MAXWELL OIL COM	PANY	X				272 J.301
Address 2017 Continenta	l National B	ank Building,	Fort Worth, Texa	as - 76102	. ·	in ant ar
REASON (S) FOR FILING (Check proper box) Change in Transporter (Check One) Wel					· · · · · · · · · · · · · · · · · · ·	Change in
01L	Image in the second letter Re-completion Image in the second letter Image in the second letter Image in the second letter Image in the second letter Image in the second letter Image in the second letter Image in the second letter Image in the second letter Image in the second letter Image in the second letter Image in the second letter Image in the second letter Image in the second letter Image in the second letter Image in the second letter Image in the second letter					
CASINGHEAD GAS	CONDENSATE		from ac J			
DESCRIPTION OF WELL AN Lease Name	D LEASE	Well No. (In-	Pool Name, Including Fo	ormation		County
Taylor Unit 4 jection						
Location	. 1980	FEET FROM THE	outh Line and	560 PEET		West
LINE OF SECTION 12	, TOWNSHIP 18	S, RANGE 3	1Е ммрм.			
CERTIFICATE OF COMPLIA	NCE AND AUT	HORIZATION TO	TRANSPORT OIL AN	D NATURAL	GAS	
Transporter: Oil				Transporter: Dry Gas Casinghead Gas		
Name: Address				Name:		
If well produces oil or liquids, give location of tanks.	Unit Sec.	Tup. Rge.	Is Well Actually Connect	ied?	Vhen	
If this production is commingled with COMPLETION DATA	that from any other	lease or pool, give C	ommingling Order No.		·	
Designate Type Of Comple	tion – (X) ^{OII}	Well Gas Well	New Well Workover	Deepen P	lug Back Sam	e Res'v. Diff. Res'v
Date Spudded	Date Compl. Red	ady to Prod.	Total Depth	 P	.B.T.D.	ŧ
Pool	Name of Prod. Formation		Top Oil/Gas Pay	op Oil/Gas Pay Tubing Depth		
Perforations			-	D	epth Casing Sho	00
	TUI	BING, CASING, AN	D CEMENTING RECORD))		
HOLESIZE	CASING & TUBING SIZE		DEPTH SET			CEMENT
						·······
TEST DATA OIL WELL				<u></u>		
Date of first prod.	Date of Test		Producing Method (Flow, pump, gas lift, etc.)			
Length of Test	Tubing Pressure		Casing Pressure	с	Choke Size	
Actual Prod. During Test *	Oil – Bbls.		Water — Bbls.	G	Gas – MCF	
* Prod. after recovery of tota GAS WELL	l volume of load oil	and must exceed norm	nal unit allowable or test m	ust be for full 24	hrs.	
Actual Prod. Test - MCF/D	Length of Test	81 / 	Bbls. Condensate/MMCF	ondensate/MMCF Gravity of Condensate		nsate
Testing Method — (pitot, back pr.)	Tubing Pressure	¥.,	Casing Pressure	CI	hoke Size	
CERT	IFICATE			ONSERVATI		SION
I hereby certify that the information			11.17	1291967		
est of my knowledge and belief, and f ations of the Oil Conservation Commi			APPROVED	Gresse	Æ	, 19
			TITLE DIL AND GAS INSPECTOR			
Joseph D. Kennedy (Sig	nature					
Secretary-Treasurer			. If this is a reason	t for allowable f-	e a noule delle	d on doar-s-st ti
(Title)			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.			
J <u>une 13, 1967</u> (Date)			This form must be filled out completely for allowable on new and re- completed wells.			
			Fill out Sections	i, II and III for a	hange of owner	, well name, trans-

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