Form C-104 i able will be a month of co	is to be subn assigned effe moletion or	ctive 7:00 / recompleti	MEXICO OIL Santa JEST FOR (the operator before JADRUPLICATE A.M. on date of con on. The completion	mpletion of date shal	recompletion, I be that date i	provided this for n the case of an	orm is sted	during calendar
WE ARE H KEOHANE	EREBY RE -SA UNDE npany or Open , Sec	QUESTIN IR S-WEL rator) 24	т <i>I8S</i> , R.	LE FOR ON Term (Lease) SIE	(Place) (Place) WELL, KNC (Well No NMPM.,	. NEW MEX OWN AS: I	NW	(Date) 4
Eddy			County. Date Spu Elevation378	dded 0	3/15/61	Date Drilling	Completed PBTD_	4/25/6I
	e indicate lo	A	Top Oil/Gas Pay PRODUCING INTERVAL			f Prod. Form	QUEEN	
E 1	F G	H	Perforations	<u>38</u> 11 -	Develo	Shoe 4232	Depth Tubing	4200
L	K J	I	OIL WELL TEST - Natural Prod. Test					
M	N O	Р	Test After Acid or load oil used): <u>I</u> <u>GAS WELL TEST</u> -	Fracture T 20 bbls	oil,O	_bbls water in	ume of oil eq	Korona and a second and
-230 W		<u> </u>	Natural Prod. Test Method of Testing			y; Hours flowed	Choke	Size
Sire	ing and Come Feet	Sax	Test After Acid or				CF/Day; Hours	flowed
8-5/8	897	50	Choke Size					
7	4 2 3 2	<i>I</i> 00	Acid or Fracture T sand): 900 B Casing T	RLS. Ö	POIL. 4	0.000# 01	P. SAND.	250 GALS.
			Press. 980 F	ress. VO	oil run to	tanks AAX	2, 1901	
			Gas Transporter			-		
Remarks :			·····					
I heret Approved	by certify th	at the info MAY4	rmation given abov 1961	• •		the best of my kinst SA UNDERS	nowledge. WELCH Operator)	· •
		RVATION	COMMISSION	. .	By	M. K.	LU / O	nl
By:			<u> </u>		Title	OWNER Communication	is regarding	well to:
¶/i Title	LAND GAS I	NSPECTUL	<u>√</u>		Name B.I	.KROHANR	700	
				-	Address Rot	U. BOX I. SWELL, NE	W MEXIC	0

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NEW MEXICO OIL CONSERVATION COMMISSION Form C-110 SANTA FE, NEW MEXICO Revised 7/1/45
IFile the original and 4 copies with the appropriate district office) CENTIFICATE OF COMPLIANCE AND AUTHORIZATION
CERTIFICATE OF COMPLIANCE AND AUTHORIZATION RENAL A
Company or Operator KEOHANE SAUNDERS WELCH & IVERSONSe FEDERAL FROMANE
Well No. I Unit Letter B S 24 T ISS R SIE Pool UNDESIGNATED
County EDDY Kind of Lease (State, Fed. or Patented) FEDERAL
If well produces oil or condensate, give location of tanks: Unit B S24 TISS R 3IE
Authorized Transporter of Oil or Condensate TEXAS NEW MEXICO PIPE LINE
P. O. BOX 1510
(Give address to which approved copy of this form is to be sent)
Authorized Transporter of Gas
Address Date Connected
Address Date Connected (Give address to which approved copy of this form is to be sent)
If Gas is not being sold, give reasons and also explain its present disposition:
VENTED
Reasons for Filing: (Please check proper box) New Well NEW WELL ()
Change in Transporter of (Check One): Oil () Dry Gas () C'head () Condensate ()
Change in Ownership () Other ()
Remarks: (Give explanation below)

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The undersigned certifies that the Rules and Regulations of the Oil Conservation Com-mission have been complied with.

Executed this t	he dry day of NAY	19_ <u>61</u>
		By SM. Rechance
Approved	<u>MAY 4 1961</u> 19	Title <u>CO-OWNER</u>
OIL CON	SERVATION COMMISSION	CompanyKEOHANE SAUNDERS WELCH &
mill	\rightarrow $-+$	IVERSON
By MLC	Imistyena	Address P. O. Box II20
* 		ROSWELL, NEW MEXICO
Title OIL AND GAS	INSPECTOR	

OIL CONSERVATION COMMISSION ARTESIA DISTRICT OFFICE No. Copies Received 🧲 DISTRIBUTION NO FURNISHED 21 UPERATOR SANITA FE 1 PRORATION OFFICE STATE LAND OFFICE U. S. G. S. TRANSPORTER 1 FILE BUREAU OF MINES