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	DISTRIBUTION SANTA FE /	NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE		Form C-104
	FILE			Supersedes Old C-104 and C-11 Effective 1-1-65
	AND U.S.G.S. AUTHORIZATION TO TRANSPORT OIL AND NATURAL			<b>A</b> S
	IRANSPORTER OIL /			
	OPERATOR / PRORATION OFFICE		RECEIVI	E D
I. ;	Operator JUN 1 5 1977			
	Address 1610 North J, Midland, Texas 79701 O.C.C.			
	Reason(s) for filing (Check proper box)		S CASINGHEAD GAS MUST NOT BE FLARED AFTER 8-1-77 FLARED AFTER 8-1-77	
	New Well	Oil Dry Ga	s CASINGHEAD G.	8-1-77
	Change in Ownership			
			IS OBTAINED	
	If change of ownership give name and address of previous owner			
U.	ESCRIPTION OF WELL AND LEASE			
	Lease Name		WATH Foderal	
	Federal 26	3 Shugart - <del>Gray</del>	ourg	
	Unit Letter <u>G</u> ; <u>2310</u> Feet From The <u>North</u> Line and <u>1980</u> Feet From The <u>East</u>			
	Line of Section 26 Tow	nship 185 Range	31Е , ММРМ,	Eddy County
Ш.	DESIGNATION OF TRANSPORT	ER OF OIL AND NATURAL GA	S	ed some of this form is to be seen
	Name of Authorized Transporter of Oil Navajo Crude Oil Purch.		Address (Give address to which approv P.O. Drawer 175. Artes	
	Name of Authorized Transporter of Cas.	inghead Gas 🛴 or Dry Gas 🗍	Address (Give address to which approv	ed copy of this form is to be sent)
	Continental Oil Co.	Unit Sec. Twp. Ege.	P.O. Box 2197, Houston, Is gas actually connected? Whe	
	If well produces oil or liquids, give location of tanks.	G 26 18S 31E		gotiating contract
	If this production is commingled with	h that from any other lease or pool,	give commingling order number:	
IV.	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Restv. Diff. Restv.
	Designate Type of Completion		X Total Depth	P.B.T.D.
	Date Spudded	Date Compl. Ready to Prod. 4/25/77	4115'	4073'
	2/7/77 Elevations (DF, RKB, RT, GR, etc.)	A723777 Name of Producing Formation	Top Oll/Gas Pay	Tubing Depth
	3657.8 GR	Grayburg	3894 '	3987 '
	Perforations 4028' to 4047' w/2 jet shots/ft.			Depth Casing Shoe 4113'
	4028 80 4047		CEMENTING RECORD	4115
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
	12 1/2"	8 5/8"	838 '	450 sx
	7 7/8"	4 1/2"	4114'	475 sx
V.	TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allow able for this depth or be for full 24 hours)			
	OIL WELL Date First New Oil Bun To Tanks	Date of Test	Producing Method (Flow, pump, gas lif	t, etc.)
	4/25/77	£/3/77	Pump	
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size
	24 hrs. Actual Prod. During Test	 Oil-Bbla.	<u>18 psi</u> Water-Bbls.	Gas-MCF
	205.94	11.04	194.9	2.26
	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 COMPLIANO	CE	OIL CONSERVA	TION COMMISSION
			APPROVED JUN 1 6 1977	
	I hereby certify that the rules and r Commission have been complied w above is true and complete to the	ith and that the information given	BY N. a. Spessett	
	Mad a Taylor		TITLE <u>SUPERVISOR</u> , DISTRICT 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.	
(Signature)		· · · · · · · · · · · · · · · · · · ·		
	Ag	ent /	All sections of this form must be filled out completely for allow- able 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	
	6/13			
	íDa			
			- completed wells.	

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