

NO. OF COPIES RECEIVED		6
DISTRIBUTION		
SANTA FE		1
FILE		1
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	1
	GAS	
OPERATOR		2
PRORATION OFFICE		7

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

I.

Operator	Standard Oil Company of Texas		OCT 13 1965
Address	A Division of Chevron Oil Company		
	3610 Avenue B - Snyder, Texas		O. D. G. ARTESIA, OFFICE
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"/>
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>
		Dry 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	Well No.	Pool Name, Including Formation	Kind of Lease
Bogle Flats Unit 10	4	Indian Basin, Upper Pennsylvanian Gas	State, Federal or Fee
Location			Federal
Unit Letter	P	2100 Feet From The	North Line and
		1650 Feet From The	West
Line of Section	10	Township	22N
		Range	23E
		NMPM,	Edy
			County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil	<input type="checkbox"/>	or Condensate	<input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
The Permian Corporation				1508 W. Wall - Midland, Texas
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)
Not available				
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.
Test Tank	J	4	22N	23E
				Is gas actually connected?
				No
				When

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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>					
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
7-3-65	8-27-65	7630'	7560'					
Pool	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
Indian Basin	Glenn (Carbon)	7143'	7074					
Perforations			Depth Casing Shoe					
7143, 45, 47, 63, 67, 79, 81, 88, 90, 92, 94, 7216, 18, 20, 22, 24, 26, 34, 36, 38, 40, 75, 77, 79, 81, 83, 98, 7300 02, 04, 06 w/1 RJ			7628					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
17 1/2"	13-3/8"	255'	Circ. to surface					
11"	8-5/8"	2253	Circ. to surface					
7-7/8"	5 1/2"	7630	250 sbs. cement					
4-3/4"	2-3/8"	7074	Packer at 7060					

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)

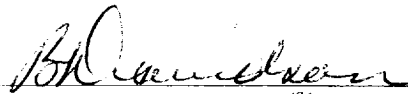
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

Request clearance to run 420 bbls. condensate while cleaning up and conducting
GAS WELL Absolute Flow Potential and Ratio Stabilization

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
46,000	4	11.10	54.4
Testing Method (pilot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size
Back pressure	2214	0	16/64" to 21/64"

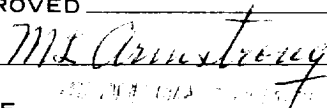
VI. CERTIFICATE OF COMPLIANCE

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.


B. Davidson
Lead Drilling Engineer
October 8, 1965

OIL CONSERVATION COMMISSION

OCT 13 1965

APPROVED _____, 19____
BY 
TITLE _____

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 allow-
able on new and recompleted wells.

Fill out Sections I, II, III, and VI only 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.