1	· · · · · ·	1		
	DISTRIBUTION		ONSERVATION COM-SSION	Form C-104 Supersedes Old C-104 and C-114
ł	FILE I	REQUEST	AND	Effective 1-1-65
ľ	U.S.G.S.	AUTHORIZATION TO TRA		AS
Ī	LAND OFFICE	REC	NSPORT ELOND NATURAL G	
	IRANSPORTER OIL   GAS		Y 1 1973	
	OPERATOR 3	NIM.	1 13,0	
	PRORATION OFFICE		), C. C.	
	David Fasken ARTESIA, OFFICE			
	Address 608 First Natl. Bank Bldg., Midland, Texas 79701			
	Reason(s) for filing (Check proper box) Effective 5-1-73 Other (Please explain)			
	New We!l Change in Transporter of: Recompletion Oil Dry Gas			* .
	Recompletion Change in Ownership		sate X	
	If change of ownership give name and address of previous owner			
	DESCRIPTION OF WELL AND I	LEASE		
•	Lease Name Skelly-Federal (Com.)	Lease No. Well No. Pool Na:	ne, Including Formation an Basin-Morrow Gas	Kind of Lease State, Federal or Feederal
	Location		840	
	Unit Letter;;	Feet From The West Lin	e and Feet From T	
	Line of Section 9 Tow	mship 21-S Range	24-Е , ммрм,	Eddy County
I.	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA	S	
	Nome of Authorized Transporter of Oll Navajo Crude Oil Purc	or Condensate 🛛 chasing Co.	Address (Give address to which approv Drawer 175 Artesia, N	ew Mexico 88210
			Address (Give address to which approved copy of this form is to be sent) 608 First Natl. Bank Bldg., Midland, Texas	
	David Fasken If well produces oil or liquids,	Unit Sec. Twp. P.ge.	Is gas actually connected? Whe	n
	give location of tanks.	<u>S 5 21-S 24-E</u>	Yes i	May, 1968 R-3395
	If this production is commingled wit COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back   Same Res'v. Dliff. Res'v.
	Designate Type of Completio		New Well Workover Deepen	
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
	Elevations (DF, RKB, RT, GR, etc.)	Name of Froducing Formation	Top Oil/Gas Pay	Tubing Depth
	Perforations			Depth Casing Shoe
	TUBING, CASING, AND CEMENTING RECORD			
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
	FIGEL SILL			· · · · · · · · · · · · · · · · · · ·
		D ALLOWARKE (Test must be a	ther recovery of total volume of load oil	and must be equal to or exceed top allow
۷.	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 allou able for this depth or be for full 24 hours)			
	Date First New Oil Run To Tanks	Date of Test-	Producing Method (Flow, pump, gas lij	(t, etc.)
				Choke Size
	Length of Test	Tubing Pressure	Casing Pressure	
	Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
	GAS WELL	•		
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
	Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size
۲ <b>۲</b> .	CERTIFICATE OF COMPLIAN	 CE	OIL CONSERVA	
			APPROVED MAY 2 1973	
	I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given		APPROVED MILL	
	above is true and complete to the best of my knowledge and belief.			
			TITLE <u>OIL AND GAS INSPECTOR</u> This form is to be filed in compliance with RULE 1104.	
	S. L. Parks		If this is a request for allowable for a newly drilled or deepened	
	(Signature)		I welt this form must be accompanied by a tabulation of the deviation	
	Agent		tests taken on the well in accordance with RULE 111.	
	(Ti:le)		All sections of this form must be filled out completely for allow able on new and recompleted wells.	
	April 27, 1973		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	
	a second s	2:(-)	well name or number, or transport	ter, or other such change of concition
		•	Separate Forms C-104 mus completed wells.	t be filed for each pool in multiply