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	SANTA FE		CONSERVATION COMMISSION	Form C -104 Supercodes Old C 104 and C 11
	FILE	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-11 Effective 1-1-65
	U.S.G.S.	-	AND	
		AUTHORIZATION TO TRA	ANSPORT OIL AND NATURAL (	GAS
	LAND OFFICE		RECEIVE	כ
	TRANSPORTER OIL		Principal ton 3 4 -	
	GAS			
	OPERATOR ,		FFB 2 6 1974	
I.	PRORATION OFFICE		1 L D : 0 13/4	
••	Operator			
	Toyag Oil & Cag Corn			
	Texas Oil & Gas Corp.  Address  ARTESIA, OFFICE			
	P. O. Box 591, Mic	dland, Texas 79701		
	Reason(s) for filing (Check proper bo	x)	Other (Please explain)	
	New Well X	Change in Transporter of:		
	Recompletion	Oil Dry Co	15 Lud Com To de	and the second of the second o
	Change in Ownership	Casinghead Gas Conden	nsate Tuo sr	
	If change of ownership give name			
	and address of previous owner			
H.	DESCRIPTION OF WELL AND			
	Lease Name	Well No. Pool Ma	ine, Including Formation	Kind of Lease
	Yates Federal Gom		ton Flat (Strawn)	State, Federal or Fee Fodows 1
	Location		COH Fiat (Strawn)	Federal
	N O	CO === 11	1000	
	Unit Letter N ; 8	60 Feet From The South Lir	ne and <u>1980</u> Feet From	The <u>West</u>
	Line of Section 8 , To	ownship 20-S Range	29-E , NMPM, Eddy	County
		•	•	
П.	DESIGNATION OF TRANSPOR	RTER OF OIL AND NATURAL GA	AS	
	Name of Authorized Transporter of O.		Address (Give address to which appro	ved copy of this form is to be sent)
				·
	The Permian Corp.  Name of Authorized Transporter of Co	asinghead Gas cr Dry Gas	Box 1183, Houston, Address (Give address to which appro	Texas 77001
			Address (Give address to which appro	vea copy of this form is to be sent)
	El Paso Natl. Gas	El Paso Natl. Gas Co. El Paso Natl. Gas Bldg., El Paso, T		Bldg., El Paso, Tx
	If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected? Wh	en
	give location of tanks.	N 8 20-S 29-E	No Ves	2-27-74
	Tf Atia and advantage and adva		/	
	COMPLETION DATA	ith that from any other lease or pool,	give commingling order number:	
٠.	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Flug Back   Same Res'v. Diff. Res'v.
	Designate Type of Complet	ion - (X)		Frug Back Same Res-v. Diff. Res-v.
			X ! ! ! ! ! ! ! ! ! ! ! ! ! ! ! ! ! ! !	
	Date Spudded	Date Compl. Ready to Prod.		P.B.T.D.
	8-10-73	10-9-73 Name of Producing Formation	11,712 Top Oil/Gas Pay	11,665
	Pool /	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
	Burton Flat	Strawn	10 456	10 417
	Perforations	OCIAWII	1 10,410	10,417 Depth Casing Shoe
	10 450 64 10 400 00 10 500			
	10,456-64, 10,482-90, 10,501-514			
		TUBING, CASING, AND	D CEMENTING RECORD	
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
	17 1/4	13 3/8	738	650
	12 1/4		3200	
	7 7/8	4 1 /2	11,712	2200
				650
			10,417	
V.		FOR ALLOWABLE (Test must be a	fter recovery of total volume of load oil	and must be equal to or exceed top allow-
	OIL WELL  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 lift, etc.)			
	Date First New Oil Run 16 lanks	Date of Test	Froducing Method (Flow, pump, gas li	jt, etc.)
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size
	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
	1500	60"	2.4	51
	Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size
	Back pr.	3100		
.,-			Packer	1/4
VI.	CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION	
	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.		APPROVED MAR 4 1974 , 19	
			7.1 B land	
			BY OIL AND GAS INSPECTOR	
			TITLE OIL AND GAS INSPECTOR	
,			This form is to be filed in a	compliance with RULE 1104.
1	IN UL	u	[]	vable for a newly drilled or deepened
	J. R. Colter (Sign	nature)		nied by a tabulation of the deviation

Staff Engineer

February 22, 1974 (Date)

tests taken on the well in accordance with RULE 111.

 $\,$  All sections of this form must be filled out completely for allowable 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.