					х. 1. т		
	NO. OF COPIES RECEIVED	7		-	,		
	DISTRIBUTION	-					
	SANTA FE		CONSERVATION COM	lission	Form C-104		
	FILE		T FOR ALLOWABLE		Supersedes Old C-104 au Elloctive 1-1-65	nd C-11	
	U.S.G.S.		AND				
	LAND OFFICE	- AUTHORIZATION TO TR	CANSPORT OIL AND	NATURAL GA	S		
		-					
	TRANSPORTER GAS	-1	RECE	VED			
	OPERATOR	-					
I.	PRORATION OFFICE	-	MAR 1 8	1074			
	Operator						
	Cities Service Oil Company						
	Address						
	Box 4906 - M	idland, Texas 79701	ORTESIA, O	FFICE			
	Reason(s) for filing (Check proper bos	<i>(</i>)	Other (Please	explain)			
	New Well	Change in Transporter of:					
	Recompletion	Oil 🔄 + Dry G	as 🔲			ſ	
	Change in Ownership	Casinghead Gas Conde	ensate		-		
	If change of ownership give name and address of previous owner						
II.	DESCRIPTION OF WELL AND	LEASE F- 4949 - 2	-1-7.5				
	Lease Name	Well No. Pool Ngge, Including F	Formation	Kind of Lease	Lease	No.	
	Government T	Well No. Pool Ngre, Including F Neuro Ductor I Under Wolf	camp gas	State, Federal or	Fee Fed. NM 0541	1580	
	Unit Letter <u>C</u> ; <u>E</u>	310 Feet From The North Li	ne and <u>1980</u>	_ Feet From The	West		
	Line of Section 14 To	wnship 20-S Range	28-Е , мири	Ed	dy co	unty	
III.	DESIGNATION OF TRANSPOR Name of Authorized Transporter of Oil The Permian Corporati Name of Authorized Transporter of Ca		Address (Give address t		copy of this form is to be sent) xas 77001 copy of this form is to be sent)		
			1				
	El Paso Natural Gas Co	Unit Sec. Twp. Pge.	Box 1492 - E	l Paso, Tex			
	If well produces oil or liquids, give location of tanks.						
IV.	give location of tanks. C 14 20S 28E No y es 3-11-24 If this production is commingled with that from any other lease or pool, give commingling order number: * * COMPLETION DATA *						
	Designate Type of Completic	on - (X)	New Well Workover	Deepen P	lug Back Same Res'v. Diff. F	les'v.	
		X	X	<u> </u>			
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P	.B.T.D.		
	10/26/74 Elevations (DF, RKB, RT, GR, etc.)	3/4/74 Name of Producing Formation	11,500'		11,379'		
	3246' GR.	-	Top Oil/Gas Pay	T	ubing Depth		
		Wolfcamp	9206'		epth Casing Shoe		
		each @ 9206', 9209', 921	11', 9214', 9216	', 9217',	· · ·		
	9222', 9224', 9226' and 9231'. TUBING, CASING, AND CEMENTING RECORD						
ł	HOLE SIZE	CASING & TUBING SIZE	DEPTH SE	······	SACKS CEMENT		
ł	17-1/2"	13-3/8''	405'	·	300 Sacks		
ļ	12-1/4"	9-5/8''	3018'		1600 Sacks		
	8-3/4"	5-1/2"	11439'		825 Sacks		
	TEST DATA AND REQUEST FO OIL WELL		fter recovery of total volum pth or be for full 24 hours)	e of load oil and	must be equal to or exceed top o	allow-	
Ī	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow,	pump, gas lift, et	c.)		
ŀ	Length of Teet	Tubing Pressure	Casing Pressure	Ci	noke Size		
	Actual Prod. During Test	Oil-Bble.	Water-Bbls.	Go	ie - MCF		

GAS WELL

	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
	C.A.O.F. 3800	4 hrs	4.4	51.8 ⁰	
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
	Back Pressure	2731#			
VI.	CERTIFICATE OF COMPLIAN	NCE	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.

(Date)

uld (Signature) Region Operation Manager (Title) March 15, <u>1974</u>

	OIL CONSERVATION CON	AMISSION
APPROV	APR 3 0 1974	
BY	W. a. Gresset	A
TITLE	OIL AND GAS INSPECTOR	·

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 allowable 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.