	·	··· ••••						
		NEW MEXICO OIL REQUEST					Form C +104 Supersedes Old C-104 and C+11 Elfective 1+1+65	
		AUTHORIZ	AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS					
			RECEIVED					
	GAS GAS							
	OPERATOR DECISION OFFICE			APR 2 - 1974				
<i>i</i> .	Constator							
	Cities Service Oil Company V O.C.C.							
	Box 4906 - Midland,	Box 4906 - Midland, Texas 79701						
	New Wall				Other (Please explain)			
	Accompletion	OII	Dry Go		·			
	Change in Ownership Casinghead Gas Condensate							
	change of ownership give name nd address of previous owner							
17.	DESCRIPTION OF WELL ANI	0		,				
	Lease Name	Well No. Pool	Name, Including F	ormation	Kind of Lease	_	Lease No. NM 17101	
	Government U				State, Federal or Fee Fed.			
	Unit LetterG; <u>1980</u> Feet From The North Line and <u>1980</u> Feet From The East							
	Line of Section 22 T	ownship 20S	Range 2	8E , NMPM	, Eddy		County	
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS								
III.	DESIGNATION OF TRANSPOL Name of Authorized Transporter of C			Address (Give address	to which approv	ed copy of this form is	to be sent)	
	The Permian Corporation			Box 1183- Houston, Texas 77001				
	i	Name of Authorized Transporter of Casinghead Gas or Dry Gas Waiting on pipeline connection			Address (Give address to which approved copy of this form is to be sent)			
	If well produces oil or liquids,	Unit Sec.	Twp. P.ge.	Is gas actually connect	ed? Whe	n		
	give location of tanks.	G 22	205 28E		i			
IV.	f this production is commingled with that from any other lease or pool, give commingling order number:							
	Designate Type of Completion - (X)			New Well Workover	i Deepen I	Plug Back Same Re	stv. Diff. Restv.	
	Date Spudded	Date Compl. Ready		Total Depth		P.B.T.D.	<u>1</u>	
	12-22-73 Elevations (DF, RKB, RT, GR, etc.)	3-26-74 Name of Producing F	Formation	ll,490' Top Oil/Gas Pay		11,431' Tubing Depth		
	3233'	Morrow		11,271'		11,315'		
	Perforations 2-0.41" Holes	2-0.41" Holes ec. @ 11,271',11,273'11 11,280',11,413',11,414',11,415',11,41		275',11,277',11,278', '.11,423',11,425',11,427'		Depth Casing Shoe 11,490'		
	TUBING, CASING, AND CEMENTING RECORD 11,428'& 11,429'							
	HOLE SIZE	CASING & TL 13-3/8	JBING SIZE	ВЕРТН SI 350'	ET	SACKS CE 525 Sacks (C	MENT irculated)	
	12-1/4"	9-5/8"		3001'		************************	irculated)	
	8-3/4"	5-1/2"		11490'	· · · · · · · · · · · · · · · · · · ·	710 Sacks		
<i>5</i> .4	EST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allo							
	I. WEIL able for this depth or be for full 24 hours) Date First New Oil Run To Tanks Date of Test							
	Jata - Irst New OIL Run 10 Tunks					,,		
	Length of Test Tubing Pressure			Casing Pressure		Choke Size		
	Actual Prod. During Test	Oil-Bbla.		Water-Bbls.	<u></u>	Gas - MCF	· · · · · · · · · · · · · · · · · · ·	
	9.45 WELL							
	Actual Proc. Test-MCF/D C.A.O.F. 11,721			Bbls. Condensate/MMCF 2.59		Gravity of Condensate 52.5°		
	Testing Mothod (pitot, back pr.)	Tubing Pressure (St	ut-in)	Casing Pressure (Shut	-in)	Choke Size 5/64" 8/64" & 11/6	,,6/64"	
	Back Press	3650#						
V.,	CENTIFICATE OF COMPLIAN	NCÉ		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 APR 1 7 1974				
				BY_ Will Shissett				
		TITLEOIL AND GAS INSPECTOR						
	Epillen			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						
	Region Operation M	well, this torm 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 only Sections I, II. III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.						
	(7 (2)							
	April 1, 1974							