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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PROPORTION OFFICE	

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-111  
Effective 1-1-65

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JUN 25 1979

I. Operator	Cities Service Company	O. C. C. ARTESIA, OFFICE
Address	Box 1919 Midland, TX 79702	
Reason(s) for filing (Check proper box)	Other (Please explain)	
New Well <input type="checkbox"/>	Change in Transporter of:	This well has been placed in the pool designated below. Please notify the Commission within 10 days if you are NOT in agreement with this action.
Recompletion <input checked="" type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>	
Change in Ownership <input type="checkbox"/>	Casinghead 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	Lease No.
Little Box Canyon Unit	1	Box Canyon Permian Under Cisco	State, Federal or Fee Federal	NM 12241-A
Location				
Unit Letter J	1650	Feet From The South	Line and 1980	Feet From The East
Line of Section 7	Township 21S	Range 22E	NMPM, Eddy	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)
Not Determined	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
El Paso Natural Gas Co.	Box 1384, Jal, NM 88252
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
	YES 6-22-79

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.
		X				X		X
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
7/4/75	6/20/79	8350'	7290'					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
4399' GR	WC + Cisco	5864'	5748'					
Perforations 2 0.50" Holes each @ 5864, 5866, 5879, 5898, 5902, 5903, 5930, 5931, 5980, 5983, 5986, 5987, 5988, 5989, 5994, 6014, 6015, 6037, 6038, 6039, 6040, 6084, 6087, 6089.			Depth Casing Shoe					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
17 1/2"	13-3/8"	30'	3 yds. Redi-Mix					
12 1/4"	9-5/8"	1808'	1213 sx (Circulated)					
7-7/8"	5-1/2"	8314'	560 sx (TC 5750)					

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

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
750	10 hrs.		
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
Back Press.	1250#		1"

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.



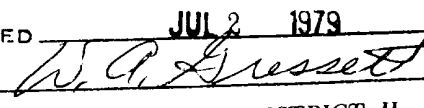
Region Operations Manager

(Title)

6/21/79

(Date)

OIL CONSERVATION COMMISSION

APPROVED JUL 2 1979  
BY   
TITLE SUPERVISOR, DISTRICT II

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.  
Separate Forms C-104 must be filed for each pool in multiple completed wells.

RECEIVED

OIL CONSERVATION DIVISION  
P. O. DRAWER DD  
ARTESIA, NM 88210

JUN 26 1979

O. C. C.  
ARTESIA, OFFICE June 25, 1979  
DATE \_\_\_\_\_

NOTICE OF GAS CONNECTION

This is to notify the Oil Conservation Division that connection for the purchase  
of gas from the \_\_\_\_\_ Cities Service Oil Co. (1280)

Little Box Canyon #1 \_\_\_\_\_, Eddy \_\_\_\_\_, J \_\_\_\_\_ 7-21-22  
LEASE & WELL COUNTY UNIT S-T-R  
*Box Canyon Basin*  
~~Undesignated Cisco Line~~ \_\_\_\_\_, El Paso Natural Gas Co.  
POOL NAME OF PURCHASER

was made on June 22, 1979 \_\_\_\_\_, 26982 \_\_\_\_\_, 01 \_\_\_\_\_  
DATE SITE CODE SITE WELL NUMBER

El Paso Natural Gas Co.  
PURCHASER

*Thomas R. Elliott*  
REPRESENTATIVE

Gas Production Status Analyst

TITLE

TRE:bl

cc: Operator

Oil Conservation Division - Santa Fe, NM

H. P. Logan

M. E. McEuen

Proration

Measurement - Jal

R. L. Tabb

Earl Smith

File