NO. OF COPIES REC	j .	10	
DISTRIBUTIO			
SANTA FE	1		
FILE	1	~	
U.S.G.S.			
LAND OFFICE			
IRANSPORTER	OIL	17	
I KANSI OKI EK	GAS	1/	
OPERATOR	1		
PRORATION OF	Γ'		

NEW MEXICO OIL CONSERVATION COMMIL ON REQUEST FOR ALLOWABLE

Form C-104
Supersedes Old C-104 and C-110

ļ	FILE / V										Effect	ive 1-1-6	5	
	u.s.g.s.		$\perp \perp$		AUTHO	DRIZATI	ON TO TRA	ANSPORT	COIL AND	NATURAL (GAS			
-	LAND OFFICE		 	_							0 5	. C E	IVED	
	IRANSPORTER	OIL	 / , 	\dashv							7K E.		IAFD	
}	005514705	GAS	1/4	-										
_	OPERATOR		 / 								M	AR 3	0 1979	
ı.	PRORATION OF Operator	FICE												
Morris R. Antweil											. C.			
	Address						ARTESIA, OFFICE							
	Вс	x 20	10,	Ho]	bbs, Ne	ew Mex	240							
	Reason(s) for filing						•	Other (Please explain)						
	New Well				Change in	n Transport	ter of:		Change	of well	l name to) be		
	Recompletion				Oil		Dry Go	ıs 🔲	effect	ive 1 Ar	oril, 197	9.		
	Change in Ownershi	Change in Ownership Casinghead Gas Condens								us Name-	No.1 Mac	ho N	orte	
•				_										
	If change of owners and address of prev			e										
II. ,	DESCRIPTION O	F WEL	L AN	D LE	EASE					Tyring of T				
j	Lease Name	Com			Well No.		e, Including F			Kind of Lease		. + -	Lease No.	
	Mesa Macho		<u>. </u>			Burc	on Flat	. MOII		State, Federa	lorFee Sta		K-6775	
	Location	_	7.	200		3.	1.		1000		T - 1			
Ì	Unit Letter	G	· ;;	980	Feet Fro	om The N	ortn _{Lir}	e and	1980	Feet From '	_{The} East	<u>. </u>		
		24			20-	-S	. 2	7-E			Eddy	,	_	
Į	Line of Section			Towns	hip 20		Range Z		, NMPN	А,			County	
_					D 05 011	4 3 / D 3 / 4	Trup II CA							
II.	DESIGNATION O	FITURDO	NSPO	OUL	R OF OIL	AND NA Condensate			(Give address	to which approx	ved copy of this	form is to	be sent)	
į	_				_		<u> </u>	1						
}	The Permia					or Dry	/ Gas X				Texas 79		be sent)	
ļ	El Paso Na							Box	1492 E	l Paso,	TX 79978	•	ŕ	
	Natural Ga		_	ine	Compar	Y Twp	. P.ge.	Box Is gas ac	283 H	ouston.	TX 77001			
ļ	If well produces oil give location of tank		8,	1	' -		-S 27-E	1	Yes	i	26 Febr	narv	, 1977	
Į									<u> </u>		20 1021	<u> </u>	,	
	If this production i COMPLETION D		ngiea	with	that from an	ly other le	ease or poor,	give com	ningling orde	r number:				
١.						Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back S	ame Res	v. Diff. Res'v.	
	Designate Ty	pe of C	omple	tion	-(X)		x	į		į	i i		· [
ł	Date Spudded			D	ate Compl. F	leady to Pr	od.	Total De	pth		P.B.T.D.			
Ì	16 Sept.	, 19	76		23 No	vembe	r, 1976	1	1,430'		11,380	, •		
1	Elevations (DF, RK.	B, RT, G	R, etc.	j N	lame of Produ	ucing Form	ation	Top Oil/	Gas Pay		Tubing Depth			
	3350' GR	3350' GR						<u> </u>	1,242'		11,200'			
Ī	Perforations				•						Depth Casing Shoe			
	11,242'	-11,	250 '	·				11,430'						
					TUBING, CASING, AND			CEMENT	TING RECOP	RD				
	HOLE					& TUBIN	IG SIZE	ļ	DEPTHS			KS CEM		
1	17-1/2				13-3				66		650sx		yas	
	12-1/4					5/8"		-	<u>260</u>		1700 sx			
	8-3/4					/2"		 	11,43		525 sx			
Į						3/8"			11,20		<u>i.,</u>			
	TEST DATA AN	D REQ	UEST	FOR	ALLOWA	BLE (7			ry of total volu or full 24 hour		and must be equa	il to or es	xceed top allow-	
ī	OIL WELL Date First New Oil	Bun To 7	Canks	ID	ate of Test				-	v, pump, gas lij	ft, etc.)		 1	
	Date Little Men On				-10 01 1111									
}	Length of Test			T	ubing Pressu	ure		Casing P	ressure		Choke Size	0		
ı													<i>ا</i> * * * * * * * * * * * * * * * * * * *	
1	Actual Prod. During	Test		-	il-Bbls.			Water - Bi	ols.	`	Gas-MCF) 1	
	-											$\underline{\hspace{1cm}}$	1. 1	
I,												4/	1,00	
	GAS WELL										4	01	July Will	
ſ	Actual Prod. Test-	MCF/D		L	ength of Tes	ıt		Bbls. Co	ndensate/MMC	F	Gravity of Con	densate	ℓ^{s}	
													, 1 '	
	Testing Method (pit	ot, back	pr.)	Т	ubing Pressu	we (Shut-	in)	Casing P	reasure (Shut	:-in)	Choke Size			
											ــــــــــــــــــــــــــــــــــــــ			
Ί.	CERTIFICATE (OF COM	APLIA	INCE	}				OIL	CONSERVA	TION COMM	IOIZZII	1	
									APR 3 - 1979					
	I hereby certify the	at the ru	les an	id reg	ulations of	lations of the Oil Conservation			APPROVED					
Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.							BY W. a. Sresset							
about in the and complete to the boat of my thousands and and						SUPERVISOR, DISTRICT II								
Rmw Elin							TITLE							
							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.							
													(Signature)	
	Agent													
•			•	(Title)				able of	n new and re	completed we	116.			
28 March, 1979							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.							
•			_	(Date))	•								
<u> </u>								Separate Forms C-104 must be filed for each pool in multiply completed wells.						
	I							completed wells.						