ſ	HO. OF COPIES RECEIVED 1 4	א							
	DISTRIBUTION	NEW MEXICO OIL C	ONSERVATION COMMISSION	Form C-104					
	SANTA FE	REQUEST	REQUEST FOR ALLOWABLE						
	FILE / V		AND	Ellective 1-1-65					
	U.S.G.S.	_ AUTHORIZATION TO TRA	ANSPORT OIL AND NATURAL C	ARECEIVED					
	IRANSPORTER OIL GAS			APR 1 9 1979					
1	PROFATION OFFICE								
••	Operator	/		ARTESIA, OFFICE					
	Cities Service Company V Address								
	P.O. Box 1919 Mic Reason(s) for filing (Check proper box	iland, TX 79702	Other (Please explain)						
	New Well	Change in Transporter of:							
	Recompletion X Change in Ownership	Cil Dry Ga Casinghead Gas Conder							
	If change of ownership give name								
	and address of previous owner								
11.	DESCRIPTION OF WELL AND	LEASE Well No.; Pool Name, Including F	ormation Kind of Leas	e Lease No.					
	Tracy "E" Com	1 Wildcat Atoka	A State, Fødera	l or Fee					
	Location E 185	80 Feet From The North Lin	ne and <u>660</u> Feet 7 rom 7	The West					
	Unit Letter <u>E</u> ; <u>188</u>								
	Line of Section 30 To	wnship 21S Range	27E , NMPM, Eddy	County					
	DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL GA	Adress (Give address to which appro-	ued conv of this form is to be sent)					
	Name of Authorized Transporter of OI. NONE	or Condensate							
	Name of Authorized Transporter of Ca		Address (Give address to which appro-						
	El Paso Natural Gas	Unit Sec. Twp. Eqe.	Box 1384, Ja1, NM 8825 Is gas actually connected?						
	If well produces cil or liquids, give location of tanks.		Yes	4/ 18 /79					
IV	If this production is commingled wi COMPLETION DATA	f this production is commingled with that from any other lease or pool, give commingling order number:							
	Designate Type of Completi	on - (X) Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.					
	Date Spudied	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
	12/4/76	3/12/79 Name of Producing Formation	11,500 Top Cil/Gas Pay	10,870'					
	Elevations (DF, RKB, RT, GR, etc.) 3119.5' GR	Atoka	10,584'	10,490'					
		oles @ 10,584, 10,585, 10	0,586, 10,589, 10,590,	Depth Casing Shoe 11,548					
	10,591, 10,592, 10,	TUBING, CASING, ANI	D CEMENTING RECORD						
	HOLESIZE	CASING & TUBING SIZE	DEPTH SET 385'	SACKS CEMENT					
	<u>20''</u> 14-3/4''	<u>16"</u> 10-3/4"	2265'	1700					
	8-3/4"	7-5/8"	8850' 8488.62' - 11,548'	<u> </u>					
	8-3/4" TEST DATA AND REQUEST F	5" (liner)		and must be equal to or exceed top allow.					
ν.	OIL WELL	able for this de	epth or be for full 24 hours) Producing Method (Flow, pump, gas li	A A A A A A A A A A A A A A A A A A A					
	Date First New Cil Run To Tanks	Date of Test	Frondering method (1 cont front)	Var pre l'					
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size					
	Actual Pred, During Test	Cil-Bbis.	Wator - Bbls.	Gas-MCF IP 10 1 F					
				p. 1, D. J.					
	GAS WELL			je (~					
	Actual Pred, Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate					
	480 Testing Method (pitot, back pr.)	6hrs Tubing Freesure (Shut-in)	NONE Casing Pressure (Shut-in)	Choke Size 15/64"					
	Back pressure	550#		TION COMMISSION					
VI.	CERTIFICATE OF COMPLIAN	CE	OIL CONSERVA	1070					
	I hereby certify that the rules and	regulations of the Oil Conservation	APPROVED APR 23						
	Commission have been complied above is true and complete to th	with and that the information given e best of my knowledge and belief.	BY DISTRICT II						
			TITLE SUPERVISOR, DISTRICT II						
	Region Operations N		This form is to be filed in compliance with NULE 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 NULE 111. All eactions of this form must be filled out completely for allow-						
	- Juler	sature)							
	(^T) April 18, 1979	iile)	able on new and recompleted wells. Fill out only Sections I. II. III. and VI for changes of owner, Fill out only Sections I. II. III. and VI for changes of condition.						
		ate)	Fill out only Sections I. II. III, and the such change of condition well name or number, or transporter, or other such change of condition. Separate Forms C-104 must be filed for each pool in multiply						

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11 Haute of Human P	•							
Separate Forms C-104	mu#t	be	filed	fur	each	boot	in	mutubi

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

NOTICE OF GAS CONNECTION

DATE April 20, 1979

4 1

This is to notify the Oil Conservation Division that connection for the

where of one from the	Cities Service Oil Compan	y (1280)	
rchase of gas from the	OP ERATOR		
Tracy E Com. #1	Eddy Co.	E	30-21-27
LEASE & WELL	COUNTY	UNIT	S-T-R
Wildcat Atoka POOL	F1 Paso Natural NAME OF PURCHA	<u>Gas Co.</u> SER	
was made on April 20, 197	9 · <u>26666</u>		•
DATE	SITE CODE & S	ITE WELL NUMBE	

El Paso Natural Gas Co.

PURCHASER REPRESENTATIVE x

Gas Production Status Analyst

TITLE

TRE: b1
cc: Operator
Oil Conservation Division - Santa Fe, NM
H. P. Logan
R. H. Barnett
Proration
Neasurement Dept. - Jal
R. L. Tabb
File

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APR 23 1979

O. C. C.