	,			
-	DISTRIBUTION	NEW MEXICO Occ.	OORETREVATION CON HON	Form C -104
-	SANTA FE		FOR ALLOWABLE	Supersedes Old C-104 and C-110
-	FILE	-	485.2	Effective 1-1-65
İ	U.S.G.S.	AUTHORIZATION TO TR	ANSFORT OF AND MATURA	AL GAS
	LAND OFFICE			
	IRANSPORTER OIL		RECEIN	V E D
_	GAS			
- I	OPERATOR		JAN 131	379
I	PRORATION OFFICE		<u> </u>	
	CITIES SERVICE OIL COMPANY V			
5	ARTEU-A Life C			
	P. O. BOX 69, Hobbs, N.M. 88240			
-	Reason(s) for filing (Check proper box)		Char (, lease explain)	
	New We!!	Change in Transporter cf:	To report cha	nge in percentage of gas
İ	Recompletion	On Esty ?	E Carros of	transporters
	Change in Ownership Casinghead Gas Constructive Construct			
i	f change of ownership give name and address of previous owner			
		7.45		
11.	DESCRIPTION OF WELL AND I	JEASE Well No. Pool Name, Including		_
	Spencer "A"	1 S. Carlsbac		ederal or Fee Fee
1	Location			
	Unit Letter 0 ; 660	Feet From The South	ine and1980 Feet :	From The East
	Line of Section 30 Tow	mship 22S Range	27E , NMPM, EC	ldy County
	DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS			
III.	DESIGNATION OF TRANSPORT Name of Authorized Transporter of Oil	or Condensate	Agatess (Give address to which	approved copy of this form is to be sent)
	Kame of Kamorrad Transpi	_		
	Name of Authorized Transporter of Cas	inghead Gas or Dry Gas X	Australia Australia and Australia B. O. Box 1320 Hobb	approved copy of this form is to be sent) 05, N.M. 88240
	lano. Inc. (50./9302)	<i></i>	P.O. ROX 2525 - HOUS	ton, Texas 77001
	Transwestern Pipeline If well produces oil or liquids,	Unit Sec. Twp. Sec.	is gas actually connected:	Sept. 24, 1971
	give location of tanks.	· · ·	Yes	
	If this production is commingled wit	th that from any other lease or poo	l, give commingling order numbe	r:
IV.	COMPLETION DATA	Cil Well Gas Yell		Diff Beets
	Designate Type of Completion	on - (X)		
		Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
	Date Spudded	Date comprise		
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top OLI/Gas Pay	Tubing Depth
				Depth Casing Shoe
	Perforations			Depth Cusing Silve
	TUBING, CASING, AND CEMERTING RECORD			
			DEPTH SET	SACKS CEMENT
	HOLE SIZE	CASING & TUBING SIZE	טפרות שבי	
••	TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allow able for this depth or be for full 24 hours)			
V.	OIL WELL Producing Mothod (Flow, pump, gas lift, etc.)			
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump,	, gas 11/1, etc.)
			Casing Pressure	Choke Size
	Length of Test	Tubing Pressure	السفيقات ويتيفيان	
		Oil - Bhie	Water - Eb.s.	Gas-MCF
	Actual Prod. During Test	Oil - Bbls.	1 :	
	GAS WELL			Gravity of Condensate
	Actual Prod. Test-MCF/D	Length of Test	Ebla. Consensate/MMCF	Cldatta of Couraments
	·	<u> </u>	Casing Pressure (Chut-im)	Choke Size
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Direction)	

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Concervation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

(Signature) ministrative Supervisor District (Titie) January 11, 1972

(Date)

OIL CONSERVATION COMMISSION

APPROVED OIL AND GAS ASPECTOR

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened with this form must be accompanied by a tabulation of the deviation thinks on the well in accordance with RULE 111.

All apprious of this form must be filled out completely for allowable on any such recompleted wells.

The 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 multiply