C		<b>ب</b>	
NO. OF COPIES RECEIVED 15	]		
DISTRIBUTION	NEW MEXICO OIL CONSERVATION COMMISSION		Form C-104
SANTA FE	REQUEST FOR ALLOWABLE		Supersedes Old C-104 and C-110 Effective 1-1-65
U.S.G.S.	AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS		
LAND OFFICE		RECEIVI	
TRANSPORTER OIL /	4		-
OPERATOR /	4	MAR 2 2 1973	}
PRORATION OFFICE	-		
Operator		O. C. C.	
<u>Texas American Oi</u> Address	1 Corporation	ARTTSIA, OFFICE	<u> </u>
1012 Midland Saving	gs Building, Midland, T	X 79701	
Reoson(s) for filing (Check proper box		Other (Please explain)	
New Well X Recompletion	Change in Transporter of:	Change in Fransporter of: OII Dry Gas CASING HEAD GAS MUST NOT BE FLARED AFTER $5 - 7 - 7 - 3$	
Change in Ownership	Casinghead Gas Conder	FLARED AFT	
If change of ownership give name		IS OBTAINED	EXCEPTION TO Pile 306
f change of ownership give name and address of previous owner			64 # 2-99
DESCRIPTION OF WELL AND	IFASE		
Lease Name	Well No. Pool Name, Including F		NN1 0405
Todd "23" Federal	1 Sand Dunes (C	herry Canyon) State, Federa	<sup>d cr Fee</sup> Federal 444
Location O 66	50 Feet From The South Lin	e and 1650 Feet From	The East
Unit Letier 0; 66	reet from the DOULII Lin	e and 1050 Feet From	ineLictSt
Line of Section 23 To	wnship 23S Range	31E , NMPM, Edd	y County
DECICALATION OF TRANSBOD	TED OF OUT AND MATURAL CA	c	
Neme of Authorized Transporter of Oli	TER OF OIL AND NATURAL GA   I X or Condensate	Address (Give address to which appro	ved copy of this form is to be sent)
The Permian Corporation		P. O. Box 1183, Houston, TX 77001	
Name of Authorized Transporter of Ca	singhead Gas 📄 🛛 or Dry Gas 🦳	Address (Give address to which appro	ved copy of this form is to be sent)
	Unit Sec. Twp. Ege.	Is gas actually connected? Wh	en .
give location of tanks.	sti produces oli ol liquida,		
f this production is commingled wi	th that from any other lease or pool,	give commingling order number:	
COMPLETION DATA	Oll Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.
Designate Type of Completion	on - (X) (X)	(X)	
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
1-30-73 Elevations (DF, RKB, RT, GR, etc.)	3-12-73 Name of Producing Formation	6150' Top Oil/Gas Pay	6115 <sup>1</sup> Tubing Depth
3450, 3 GR	Cherry Canyon	6017'	6016'
Perforation:			Depth Casing Shoe
6017' - 6032' w/30			6147'
HOLE SIZE	CASING & TUBING SIZE	CEMENTING RECORD	SACKS CEMENT
12"	8-5/8"	575	300 sx circulated
7-7/8"	5-1/2"	6147	2300 sx circulated
······································	2 7/6"	6016	
TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a	ter recovery of total volume of load oil	and must be equal to or exceed top allow-
OIL WELL	able for this de	pth or be for full 24 hours)	-
Date First New Oil Run To Tenks 2-28-73	Date of Test 3-19-73	Producing Method (Flow, pump, gas li Pump	<i>i, etc.)</i>
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hrs	20#	20#	
Actual Proc. During Test	Oil-Bbis.	Water - Bbis.	Gas·MCF
	40	1 5	
GAS WELL		·	<u></u>
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Sbut-in)	Choke Size
rearing manual hitor, buck bull	TANNA CLASSING ( DURL TH )		
CERTIFICATE OF COMPLIAN	CE	OIL CONSERVA	
		MAR 2.9.1	973
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	
		BY_ Willi Dussel	
		TITLE OIL AND GAS INSPEC	ТОН
2 6 iligan		This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or despend	
(Signature) Vice President		well, this form must be accompa- tests taken on the well in account	nied by a tabulation of the deviation -
(Title)		All sections of this form mu	at be filled out completely for allow-
March 20, 1973		able on new and recompleted we Fill out only Sections I. I	Blis. I. III, and VI for changes of owner.
			the state and shares of condition

- --