DISTRIBUTION ANTA FE		CONSERVATION AMISSION	Form C-104
ILE	REQUES	REQUEST FOR ALLOWABLE Supersedes Old C-104 ar	
.s.g.s.	MITHORIZATION TO T	AND RANSPORT OIL AND NATUR	Effective 1-1-65
AND OFFICE	AUTHORIZATION TO TI	RANSPORT OIL AND NATUR.	AL GAS A RECEIVED
FRANSPORTER OIL			A Commence of the State
GAS /			ADE o
OPERATOR			APR 24 1981
1. PRORATION OFFICE	<u> </u>		
Cities Ser	vice Company		A. D.
Address			ARTESIA, OFFICE
Box 1919,	Midland, TX 79702		
Reason(s) for filing (Check proper	box)	Other (Please explain)	
! ew Well	Change in Transporter of:		
Recompletion Change in Ownership	Ott Dry		
Change in Ownership	Casinghead Gas Cond	densate	
If change of ownership give nam	e		
and address of previous owner_			
II. DESCRIPTION OF WELL AN	ID LEASE		
Lease Name	Well No. Pool Name, Including		_ease Lease N
BRANTLEY A	Con: 1 Und. N. Lov	Jing Mor State, Fe	ederal or Fee Fee
Location Unit Letter J 1	980 Feet From The South	ine and 1980 Feet F	rom The East
Line of Section 7	Township 23S Range		ddy Count
III. DESIGNATION OF TRANSPO	ORTER OF OIL AND NATURAL G	:AS	
Name of Authorized Transporter of	Oil or Condensate 🛣	Address (Give address to which a	pproved copy of this form is to be sent)
The Permia	-	Box 1183 - Houst	
Name of Authorized Transporter of El Paso Na	Casinghead Gas 🔲 or Dry Gas 🏋 tural Gas Co.	Box 1384 - Jal N	pproved copy of this form is to be sent) M 88252
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. J 7 23S 28E	Is gas actually connected? No. Ves	When 5-21-81
If this production is commingled IV. COMPLETION DATA	with that from any other lease or pool	, give commingling order number:	
Designate Type of Comple	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res
		X	
Date Spudded 12/6/80	Date Compl. Ready to Prod. 4/16/81	Total Depth 12,545	P.B.T.D. 12,505
Elevations (DF, RKB, RT, GR, etc.		<u> </u>	
3039' GR	Morrow	Top Oll/Gas Pay 12,132'	Tubing Depth 12,121'
Perforations 2 SPF @ 12	,132,12,133, 12,134,	-	Depth Casing Shoe
12,137 , 1	2,138 , 12,139 , 12,1	.40, 12,141, 12,142	
& 12,143'	TUBING, CASING, AN	ID CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17½"	13-3/8"	436'	425
12¼" 8½"	9-5/8"	2449'	1550
6-1/8"	5" OD liner	10940' 10614 - 12,545	1600
V. TEST DATA AND REQUEST			oil and must be equal to or exceed top alle
OIL WELL	able for this d	epth or be for full 24 hours)	
Date First New Cil Run To Tanks	Date of Test	Producing Method (Flow, pump, ga	s lift, etc.)
Length of Test	Tables December 1		
Length of lest	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	Ggs-MCF
			GGG-MOI
·			
GAS WELL			
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
C.A.O.F. 13,338 Testing Method (pitot, back pr.)	4 hrs	. 4	560
1	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size 10,13,15 &
Back Press	3670#		17/64"
I hereby certify that the rules and regulations of the Oil Conservation		OIL CONSERVATION COMMISSION	
		APPROVED MAY 2	ARRROVED MAY 2 2 1981
Commission have been complied	with and that the information given	/// / / / / / / / / / / / / / / / / /	Dan and The
above is true and complete to t	he best of my knowledge and belief.	BY / M/9	- cuico

(Signature)
Region Oper. Mgr- Prod

(Title)

(Date)

4/23/81

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

SUPERVISOR, DISTRICT II

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.

Senarete Forms C-104 must be filed for each pool in multiply.