STATE OF NEW MEXICO FRIGY AND MICH GALS DEPARTMENT THE PILE LAND OFFICE

OIL CONSERVATION DIVIS ON P. O. DOX 2088 SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE AND

Form C-104 Revised 10-1-78 RECEIVED BY OCT 21 1983 O. C. D. ARTESIA, OFFICE

teparate Forms C-104 must be filed for each pool in multiply completed wells.

DPRMATON I	AUTHORIZATION T	TO TRANSPO	ORT OIL AND NATU	RAL GAS	TANK CO.	***************************************	
Service					4	galgerina algumente appliche en despusi allellen der	
Gulf Oil Corporati	on						
Address.							
P. O. Box 670, Hot	bs, NM 88240		Other (Please	e explain)			
Change in Transporter of:							
Recompletion	CII		New Well				
Change In Ownership	Caninghead Gan	Condens	iate []				
I change of ownership give name							
ad address of previous owner							
ESCRIPTION OF WELL AND	LEASE.			Kind of Lease		Loase No.	
ease Name				State, Federal	1		
Loving Federal Con	m 1 N. L.	OVING Mee) ica	J			
Location T	980 Feet From The No	rth Line	and 2235	Feet From T	h• West		
Unit Letter F : 1	760 160 100 100	<u>,,, ,, ,, , , , , , , , , , , , , , , </u>				Couply	
Line of Section 4 7	ownship 23S	Range 28	BE , NMP)	A. Eddy		County	
TO ANCEDO	DTED OF OU AND NA	TURAL GAS	S				
PESIGNATION OF TRANSPO Name of Authorized Transporter of C	or Condensate	X	Address (Give address	to which approv	red copy of this form	is to be sent)	
None			(6)	to thick copics	red copy of this form	is to be sen!)	
Name of Authorized Transporter of Casinghead Gas or Dry Gas X			Address (Give address to which approved copy of this form is to be sent) P. O. Box 2018, Roswell; NM 88201				
Transwestern Pipeline Co.		Rge.	Is gas actually connected? When 10-26-83				
If well produces oil or liquids, give location of tanks.	O.M. See, T.		Yes	 	10-5	P3	
If this production is commingled	with that from any other le	ase or pool,	give commingling ord	er number:			
COMPLETION DATA	OII Well	Gas Well	New Well Workover		Plug Buck Same	Res'v. Dill. Res'v	
Designate Type of Comple		XX	! XX	!	1 1		
	Date Compl. Ready to Pr	.1	Total Depth		P.B.T.D.		
Date Spudded 12-3-82	2 2 2		12,721'		12,641'		
clevations (DF, RKB, RT, GR, etc.	12 J 02		Top Oil/Gas Pay		Tubing Depth 11,386'		
3030' GL Atoka		11,458'		Depth Casing Shoe			
Perforations							
11,458'-11,540'	TUBING. C	CASING, AND	CEMENTING RECO	RD			
HOLE SIZE	NOLE SIZE CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT		
. 26"		20"		402'		1600	
14-3/4"		10-3/4" 7-5/8"		2,700'		2300	
9½"		J		Carl 10 Cul		475	
TEST DATA AND REQUEST	FOR ALL OWARD F23/07	Car miss 830	Rer recovery of socal vo	lume of load oil	and must be equal to	or exceed top allow	
TEST DATA AND REQUEST OUT WELL	FOR VELOUARDED 301	ble for this de	peh or be for full 24 hou	ire)	·(1 a)a)		
Date First New Oil Run To Tanks	ate First New Oil Run To Tanks Date of Test		Producing Method (FI	ow, pump, gas ii	iji, eic.)		
			Casing Pressure Water-Bbis.		Choxe Size		
Length of Test							
Actual Prod. During Test							
XCIUSI FIOG. DUIMY 1921					<u></u>		
GAS WELL	Length of Test 4 hrs		Bble. Cordenagte/AMCF		Gravity of Condensate 0		
Actual Frod. 1 . ot - MCF/D 9491							
Teeting Method (pirot, back pr.)	Tubing Presewe (Shut-	-in)	Cosing Pressure (Sh	ut-in)	Choxe Sixe		
Flow	4475#	4475#		0#		TION DIVISION	
CERTIFICATE OF COMPLI	ERTIFICATE OF COMPLIANCE		OIL CONSERVATION DIVISION				
			1	NOV 0419		19	
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.			APPROVED Original Signed By Loslic A. Clements				
			Supervisor District II				
			TITLE				
	`/		This form is	to be filed in	compliance with P	ULE 1104.	
(XV) Vite			If this is a r	If this is a request for allowable for a newly drilled or despendent well, this form must be accompanied by a tabulation of the deviation well, this form must be well in accordance with BULK 111.			
(Signature)							
Area Engineer			All sections of this form must be filled out completely for entow				
(1:de)							
10-20-83			Fill out only Sections I, II, III, and VI to thanks of condition, well name or number, or transporter, or other such thanks of condition.				

(Dute)