								/	
NO 0	OF COPIES RECEIVED	3-							
	DISTRIBUTION								
	AFE	-,	NEW MEXICO OIL CONSERVATION COMMISSION Form C-104					l C-104 and C-11	
FILE				KEQUESI	FOR ALLOWABLE AND NSPORT OIL AND NATURAL GA			Effective 1-1-65	
U.S.G			ALITHOD	IZATION TO TO					
	DOFFICE	· · · · · · · · · · · · · · · · · · ·	AUTHOR	IZATION TO TRA	ANSFORT	JIL AND NA I	UKAL GAS		
	OIL	7							
IRAN	NSPORTER GAS	7							
OPER	RATOR								
I. PROF	RATION OFFICE								
Operat	tor								
Addres	Austral Oi	1 Company	Incorpor	ated					
	2700 Humb1	e Buildir	g. Housto	n. Texas	77002				
Reason	n(s) for filing (Check	proper box)		,	77002)ther (Please exp	olain)		
New W	Vell XX		Change in T	ransporter of:		To renlac	e old for	ns previous]	in Eilad
Recom	npletion		Oil	Dry Go	ıs _	10 10prac	ord lor	ns breatons:	y riisa.
Change	ge in Ownership		Casinghead	Gas Conde	nsate				
	nge of ownership g								
and ad	ldress of previous	owner	.2						
II. DESC	RIPTION OF WE	ELL AND LI	EASE						
Lease	Na: ie			Well No. Pool No	me, Including	Formation	Kin	d of Lease	
Bı	unny et al			1 (Dual) Basin	Dakota	Sta	e, Federal or Fee	Federal
Locati	ion			(, - 40 2	24.00			rederal
Uni	it Letter P	1190	Feet From	The East Li	ne and 10	40	eet From. The	- South	
								504611	
Lir	ne of Section 10	, Town	ship 27-N	Range 9	-W	, NMPM,	San Juan		County
							J		
			ER OF OIL A	ND NATURAL GA		ive address to w	hick approved or	opy of this form is	to he sent)
	of Authorized Trans			densate XXX	Address	nte dadress to w	пист арргореа с	opy by this form in	o de senty
M	cWood Petrol	eum Marke	teers	er Dry Can T	1205 Ca	ming. Farm	ington. No	by Mexison is	to be sen!)
1		•		or Dry Gas	Address (itte dan ess to a	nicip appropou	pp of this joint to	, , ,
E.	1 Paso Natura		mpany Unit Sec.	Twp. Rge.	P. O. B	ox 1492 E	1 Pasgen To	Xas	
	ll produces oil or lig: location of tanks.	uids,	i			,			
			P 10		<u> </u>	Yes		6-14-65	
		mingled with	that from any	other lease or pool,	give commi	ngling order nu	mber:	olied for	
	PLETION DATA			Well Gas Well	New Well	Workover			s'v. Diff. Res'v.
De	esignate Type of	Completion	-(X)	XX	XX	(1	-		
Date :	Spudded		Date Compl. Red	ady to Prod.	Total Dept	h	P.1	3.T.D.	
- -	12-3-64		12 20	64					
Pool			12-28-64 Name of Producing Formation		Top Oil/Gas Pay		Tu	Tubing Desta 2	
n.	asin Dakota	i	Dake	•		420			
Perfo	orations 4321_50	65021	271 6534	ANI CECAL	721 (57	4321	De	pth Cas 5.4 Cl be	
	66081-141	, 0302'* 66191	401, 6662	-40', 6564'-	74', 057	o'-84', 65	90'-6600',		
		, , , , , , , , , , , , , , , , , , , 	TU	BING, CASING, AN	D CEMENT	ING RECORD		67 6 6	
	HOLE SIZE		CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT	
	12-1/4"			2_5/8#	7.70				
				J-3/ U		3391		250	

(Test must be after recovery of total volume of load oil and must be able for this depth or be for full 24 hours) V. TEST DATA AND REQUEST FOR ALLOWABLE Producing Method (Flow, pump, gas lift, etc. Date First New Oil Run To Tanks Date of Test - siൿUL 2 6 1965 Casing Pressure Tubing Pressure Length of Test OIL CON. COM. Oil-Bbls. Water - Bbls. Actual Prod. During Test DIST. 3

GAS WELL Gravity of Condensate Length of Test Bbls. Condensate/MMCF Actual Prod. Test-MCF/D **2200**Testing Method (pitot, back pr.) Tubing Pressure Choke SA.6 Casing Pressule 3.1 Wack Pressure 550# OIL CONSERVATION COMMISSION

VI. CERTIFICATE OF COMPLIANCE

7-7/8"

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.

1 ,2 , 2 , 2	
Marini Smith	
Marvin E. Smith (Signature)	
Senior Staff Engineer (Title)	

July 20th, 1965 (Date)

4-1/2"

1-1/4"

JUL 10 1965 APPROVED. 19 Original Signed Emery C. Arnold

250-2-4-1/2" DV Tools

TITLE Supervisor Dist. # 3

6766+

64001

This form is to be filed in compliance with RULE 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 RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out Sections I, II, III, and VI only 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 completed wells.