		~	-		
	- NO. OF COMPS ABLE ADD 5				
	DISTRIBUTION	NEW MEXICO OIL CONSERVATION COMMISSION Form C-104			
	SANTA FE	REQUEST F	REQUEST FOR ALLOWABLE Supersedes Old C-104 ad C AND RECEPTION Control of C		
	U.S.G.S.	AND RECEIVE 1-1-65 AND RECEIVED AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS			
LAND OFFICE					
				DCT 1 4 1969	
	GAS				
	OPERATOR 2 J. C. C. ARTESIA, DEPICE			TEBIA, OFFICE	
Cperator /					
		Petroleum Corporation of Texas			
	Address	P. O. Box 911, Breckenridge, Texas 76024			
	Reason(s) for filing (Check proper box) Other (Please explain)   New Well Change in Transporter of:				
	Recompletion. Oil X Dry Gas Effective November 1, 1969 Change in Ownership Casinghead Gas Condensate Change Rom Soundard				
				n Allach	
	If change of ownership give name and address of previous owner		•		
II. DESCRIPTION OF WELL AND LEASE     Lease Name     Mary Ann Cannon     Well No.     Pool Name, Including Formation     Kind of Lease     State, Federal or Fee     Fee				Kind of Lease	
				State, Federal or Fee Fee	
	Location				
	Unit LetterM ; 990 Feet From The South Line and 990 Feet From The West				
		nship 10S Range	25E , NMPM,	Chaves County	
	Line of Section 27 , Tow	nship IUS Range		<u> </u>	
III.	DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS				
	Name of Authorized Transporter of Oil		Box 3119, Midland,		
	The Permian Corpo Name of Authorized Transporter of Cas		Address (Give address to which approv		
	None			· · ·	
	If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected? Whe	n	
	give location of tanks.	K 27 10S 25E	No		
If this production is commingled with that from any other lease or pool, give commingling order number:					
IV.	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back   Same Res'v. Diff. Res'v.	
	Designate Type of Completio		ł i i ·		
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
	Pool	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
	Perforations Depth Casing Sh			Depth Casing Shoe	
	TUBING, CASING, AND CEMENTING RECORD				
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
	·				
		l			
V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or ex				and must be equal to or exceed top allow-	
۷.	OIL WELL able for this depth of de for full 24 moust				
Date First New Cil Run To Tanks Date of Test Producing Method (Flow, pump, gas lift, et			<i>i, eic.j</i>		
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
	Actual Prod. During Test	Oll-Bbls.	Water-Bbls.	Gas-MCF	
		J		· · · · ·	
	GAS WELL				
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
			Casing Pressure	Choke Size	
	Testing Method (pitot, back pr.)	Tubing Pressure	Casing Plessue		
VI. CERTIFICATE OF COMPLIANCE OIL CONSERVATION COMMISSION					
VI. CERTIFICATE OF CONFLIANCE				~ 40° 0	
	I hereby certify that the rules and	regulations of the Oil Conservation	APPROVED UUI	<u>, 1969</u> , 19	
	Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		BY	reaset	
	PETROLEUM CORPORATION OF TEXAS Mary B. Jaylor (Signature) Production Clerk		TITLE	e e e e e e e e e e e e e e e e e e e	
			TITLE		

.|| 

(Title)

October\_10, 1969 (Date)

All sections of this form must be filled out completely for allow-able 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

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