DISTRIBUTION FILE

(Date)

NEW MEXICO OIL CONSERVATION CC SSION REQUEST FOR ALLOWABLE

Form C-104 Supersedes Old C-104 and C-1.

	AND SERVICE AND AND AND AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS				
	TRANSPORTER OIL GAS	$\frac{1}{2}$	3	RECEIVED	
1	PRORATION OFFICE		NOV 9 9 4005		
-	NOV 2 9 1976 Tom L. Ingram				
	P. O. Box 1757, Roswell, New Mexi Reason(s) for filing (Check proper box)		CO 88201 ARTESIA, OFFICE		
			Other (Please explain)		
	Recompletion	Change in Transporter of: Oil X Dry C	Gas I from Permian		
Change in Ownership X Casinghead Gas Condensate					
	If change of ownership give name and address of previous owner	change of ownership give name Plains Radio Broadcasting Company d address of previous owner P. O. Box 9354, Amarillo, Texas 79105			
II	. DESCRIPTION OF WELL AND		•		
	111:40		3.111.60	Ledse No.	
	Unit Letter E; 1980 Feet From The North Line and 660 Feet From The West			n The West	
	Line of Section 34 To	ownship 11-S Range 2	29-Е , ммрм,	Chaves County	
III.	DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil				
	Navajo Crude Oil &	Europeains Ca	P.O. Drawer 175, Arte	sia, N.M. 88210	
	Name of Authorized Transporter of Co		Address (Give address to which app	oved copy of this form is to be sent)	
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. L 34 11-S 29-E		hen .	
IV.	If this production is commingled with that from any other lease or pool, give commingling order number: COMPLETION DATA				
	Designate Type of Completi	on - (X) Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.	
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
	Perforations			Depth Casing Shoe	
	TUBING, CASING, AND CEMENTING RECORD				
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
v.	TEST DATA AND REQUEST F		ifter recovery of total volume of load of	and must be equal to or exceed top allow-	
	Date First New Oil Run To Tanks	DIL WELL able for this de		Producing Method (Flow, pump, gas lift, etc.)	
	Length of Test	Tubing Pressure	Casing Pressure	10	
			Cdaing Pressure	Choke Size	
	Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF	
	GAS WELL			75.3	
	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 (Shut-in)	Choke Size	
VI.	CERTIFICATE OF COMPLIANC	CE CE	OIL CONSERVATION COMMISSION		
1	I hereby certify that the rules and r	egulations of the Oil Consequation	APPROVEDNOV 3 0-1976		
(Commission have been complied washove is true and complete to the	ith and that the information given	BY Wax possett		
				CODE COS	
	Opertor (Title) November 26, 1976		TITLE SUPERVISOR, DISTRICT II 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 only Sections I. II. III. and VI for changes of owner.		
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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.