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	DISTRIBUTION /	1	NSERVATION COMMISSION	Form C-104 Supersedes Old C-104 and C-110
-	FILE /-		AND	Effective 1-1-65
-	J.S.G.S.	AUTHORIZATION TO TRAN	NSPORT OIL AND NATURAL GAS	OCT 20 TOK
	TRANSPORTER GAS			CE/I
	PROPATION OF PICE COM	Duna 🗸		OCT 20 ED
• • └─	Operator Box 192 Artesia, N.M.			44 10 10K
A	ddress	roesia, w.n.		OF CIA
R	Reason(s) for filing (Check proper box)	Other (Please explain)	2/6
1	lew We!l	Change in Transporter of: Oil Dry Gas		
1	Change in Ownersh:p	Casinghead Gas Condens	sate	
	change of ownership give name address of previous owner			
	ild hebbioRedevall. A	De/Edward	San Andres	Federal (ind of Lease 12.068/27
L	_ease	Lease No. Well No. Pool Nam		state, Research or Fee
Ĺ	_ocation	Feet Form theLine	and 26 E Feet FChar	· /64_
	Unit Letter;			County
L		wnship Range	, NMPM,	
II. D	ESIGNO NOTION TO STATE OF OIL AND NATURAL GAS BOX 330 Abilene. Texas Address (Give address to which approved copy of this form is to be sent)			
<u> </u>	Name of Authorized Transporter of Ca	usinghead Gas or Dry Gas	Address (Give address to which approved	copy of this form is to be sent)
		J 33 6 26	Is gas actually connected? When	
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge.	is gus detadify comported.	
		ith that from any other lease or pool, a	give commingling order number:	
Г	COMPLETION DATA Designate Type of Completi		1,40,, 1,01,	Plug Back Same Res'v. Diff. Res'v.
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
 	3628 Elevations (DF, RKB, RT, GR, etc.)	Slenghter San Andrea Name of Producing Formation	Top Oil/Gas Pay	1095 Tubing Depth
	1070-1082 1083-	1087 1090 1095		1135 Depth Casing Shoe
	Perforations			
-	11 Q 1/ALE SIZE	TUBING, CASING, AND	320 DEPTH SET	None Pulled
	6 3/4	4 1/2	1135	250
-		2 3/8	1095	
			t to the standard of an	d must be equal to as exceed ton allows
•	UII MEED-TAOD	FOR ALLOWABLE (Test must be as 8-28-1965 le for this de	pth or be for full 24 h Producing Method (Flow, pump, gas lift,	
	Date First New Oil Run To Tanks 24 Hours	Date of Test	Producing Mathed (From, pump, gas voys)	2 ¹¹
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size Trace
-	Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	Gas-MCF
ا				(_v
r -	GAS WELL	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
	Actual Prod. Test-MCF/D	Cendin of lest		
	Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size
VI.	CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION	
	I hereby certify that the rules and regulations of the Oil Conservation		APPROVED 0CT 2.1 1965 , 19	
	Commission have been complied	with and that the information given he best of my knowledge and belief.	BY	
			TITLE WE WIND BANKETO	
	Them Hall Falor	_ .	This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepened	
	(Signature)		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.	
	10-18-1965			
		Title)	il shie on new and recombleted wer	10.
•	[Title)	Ett out only Sections I II	III and VI for changes of owner,
•		Title)	Fill out only Sections I, II, well name or number, or transporte	III, and VI for changes of owner, r, or other such change of condition. be filed for each pool in multiply