DISTRIBUTION

August 23, 1974

(Date)

NEW MEXICO OIL CONSERVATION MISSION REQUEST FOR ALLOWABLE

Form C-104 Supersedes Old C-104 and C-

	5.3.5		AND	Effective 1-1-65			
	S.G.S.	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS					
	TRANSPORTER OIL	RECEIVED					
	GAS						
	OPERATOR						
i.	PRORATION OFFICE		AUG 2 9 1974				
	Cities Service Oil Company						
	Address D. C. C.						
	P. 0. Box 1	1919 - Midland, Texas	79701 ARTESIA, OFFICE				
	Reason(s) for filing (Check proper bo	x)	Other (Please explain)				
	New Weil	Change in Transporter of:					
	Recompletion	Oil Dry C	≒				
	Change in Ownership	Casinghead Gas Cond	ensate				
	If change of ownership give name						
	and address of previous owner						
II.	DESCRIPTION OF WELL AND LEASE						
	Lease Name	Well No. Pool Name, including	Formation Kind of Le	dse Ledse No.			
	Earl Spencer	l Wildcat - Ca		Fee -			
		1071:					
	Unit Letter F ;	974' Feet From The North Li	ne and 1974 Feet From	m The West			
	Line of Section 25 To	wnship IN Range	28E , NMFM, De	Baca County			
		<u> </u>	, , , , , ,	Daca County			
II.		TER OF OIL AND NATURAL G.					
	Name of Authorized Transporter of Oi	l or Condensate	Address (Give address to which app	roved copy of this form is to be sent;			
	Name of Authorized Transporter of Ca	singhead Gas or Dry Gas 7	Address (Cine address to Links				
		isinghadd dds or Dry Gds {	Address (Give daares) to which app	roved copy of this form is to be sent)			
	None	Unit Sec. Twp. Rge.	Is gas actually connected?	Vhen			
	If well produces oil or liquids, give location of tanks.		No No	viie::			
i	If this production is commissed wi	th that from any other lease or pool,					
	COMPLETION DATA		give comminging order number:				
	Designate Type of Completi	on - (X)	New Well Workover Deepen	Plug Back Same Restv. Diff. Postv			
		X	X .				
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.			
	Elevations (DF, RKB, RT, GR, etc.)	8-14-74 Name of Producing Formation	7030 Top Otl/Gas Pay	6850 Tubing Depth			
	4475 GR	Canvon	64571	63761			
•	4475' GR Canyon Perforations 2-0.41" Holes each @ 6457', 6458', 646		61', 6463', 6465', 6658'	Depth Casing Shoe			
-	6659', 6660', 6702', 6703', 6707', 6749', 6751', and 6753'. 6934'						
		TUBING, CASING, AN	D CEMENTING RECORD				
÷	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT			
-	12-1/4" 7 - 7/8"	8-5/8" 5-1/2"	1732	950 Sxs. (Circ.)			
-	/-//٥٠	5-1/2"	6934	275 Sxs.			
i	· · · · · · · · · · · · · · · · · · ·						
v.	TEST DATA AND REQUEST FO	OR ALLOWARY F (Tast must be a	often recovery of social values of land of	l and must be equal to or exceed top allow			
	OIL WELL	able for this de	epth or be for full 24 hours)				
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas	lift, etc.)			
ŀ	Length of Test	Tubing Pressure	Casing Pressure	0.1.0			
	Laudin or Last	Tubing Figure	Cosing Pressure	Choke Size			
-	Actual Prod. During Test	Oil-Bblm.	Water-Bbls.	Gas-MCF			
-							
_	GAS WELL						
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate			
F	C.A.O.F. 248	4 Hrs. Tubing Pressure (Shut-in)	Casing Pressure (Shut:-in)	Choke Size			
		-	Cosing Pressure (Shut:-in)	Choke Size			
<u>. </u>	Back Press	1850#					
1. (CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION				
,	I hereby certify that the rules and regulations of the Oil Conservation		APPROVED, 19				
	Commission have been complied with and that the information given						
•	above is true and complete to the best of my knowledge and belief.						
			TITLE				
		1					
	Esperial (Signature)		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				
	Region Operation Manager tests taken on the well in accordance			ordence with RULE 111. ust be filled out completely for allow-			
	(Tit	le)	All sections of this form m	ells.			

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, well name or number, or transporter, or other such change of condition.

Sanarate Forms C-104 must be filed for each pool in multiply.

Asset Brown acres ANTALL

August 23, 1974 (Date)

NEW MEARCOOK CORSERVATION MINISTON REQUEST FOR ALLOWABLE

Form C-104
Supersedes Old C-104 and C-

	S.G.S.	-	AND	Filective 1-1-62			
	LAND OFFICE	AUTHORIZATION TO TR	ANSPORT OIL AND NATURAL	GAS			
	TRANSPORTER OIL						
	GAS		ED				
	OPERATOR	_					
1.	PRORATION OFFICE	•	AUG 2 9 1974				
	Cities Service Oil Company						
		Olo Widland Taura	CI. C. C.	=			
	Reason(s) for filing (Check proper box	919 - Midland, Texas	79701 ARTESIA. OFFICI				
	New Well	Change in Transporter of:	Other (Flease explain)				
	Recompletion	Oil Dry G	as [
	Change in Ownership		ensate				
	If change of ownership give name and address of previous owner						
	and defend of previous owner.						
II.	DESCRIPTION OF WELL AND						
	Lease Name	Well No. Pool Name, Including F		Ledse Mc.			
	Earl Spencer	1 Wildcat - Ca	nnyon State, Fede	ral or Fee Fee -			
	Unit Letter F ; 1	974 Feet From The North Li	ne and 1974 Feet From	n The West			
	Line of Section 25 To	wnship IN Range	28E , NMFM, De	Baca County			
	Eine of Section 2) 10	wnship N Range	Z8E , NMFM, De	Daca County			
III.	DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL G	15				
	Name of Authorized Transporter of Oil			oved copy of this form is to be sent)			
	1						
	Name of Authorized Transporter of Ca	singhead Gas or Dry Gas	Address (Give address to which appr	oved copy of this form is to be sent)			
	None						
	If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected? W	hen			
	give location of tanks.	1 ! ! ! ! ! ! ! ! ! ! ! ! ! ! ! ! ! ! !	No				
		th that from any other lease or pool,	give commingling order number:				
IV.	COMPLETION DATA	Oil Well Gas Well	New Well Workever Deepen				
	Designate Type of Completic	on = (X)		Plug Back Same Resty, Diff. Resty			
	Date Spudded	Date Compl. Ready to Prod.	X Total Depth	P.B.T.D.			
	4-21-74	8-14-74	7030'	6850'			
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth			
	· ·	1	1				
	4475 GR Canyon 6457 6376 Perforations 2-0.41 Holes each @ 6457, 6458, 6461, 6463, 6465, 6658 Depth Casing Shoe						
	6659', 6660', 6702', 6703', 6705', 6707', 6749', 6751', and 6753'.						
			D CEMENTING RECORD				
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT			
	12-1/4"	8-5/8"	17321	950 Sxs. (Circ.)			
	7-7/8''	5-1/2"	69341	275 Sxs.			
		<u> </u>	1				
V.	TEST DATA AND REQUEST FO	OR ALLOWABLE (Test must be a	fter recovery of intal volume of load oi	l and must be equal to or exceed top silon			
	OIL WELL Date First New Oil Run To Tanks	Date of Test	pth or be for full 24 hours) Producing Method (Flow, pump, gas l	lift are l			
	July hat New Oil Num to Tunks	244 07 1991	Producing Method (1 tow, pamp, gas	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size			
	Actual Prod. During Test	Oil-Bbls.	Water-Sbls.	Gas-MCF			
•		<u> </u>					
	GAS WELL						
	Actual Frod, Test-MCF/D	Length of Test	Bbis. Condensate/MMC	Gravity of Condensate			
	C.A.O.F. 248	4 Hrs	_	_			
	C.A.O.F. 248 Testing Method (pitos, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size			
	Back Prass	1850#	••	•			
VI.	CERTIFICATE OF COMPLIANCE		OIL CONSERV	ATION COMMISSION			
	I hereby certify that the rules and regulations of the Oil Conservation		APPROVED	. 19			
	Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.						
	above is ittle and complete to the	beat of my knowledge and belief.	!]				
			TITLE				
		1	This form is to be filed in	compliance with AULE 1104.			
	Efulla		If this is a request for allo	wable for a newly drilled or despende			
-	(Signa	(Signature)		well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.			
	Region Operation	n Manager		ordance with RULE 111. ust be filled out completely for allow-			
	(Tit		All sections of this form mi	us, se inted out completely for allow- ells.			

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.

Separate Forms C-104 must be filed for each coal in multiply.

	ANTA FE	NEW MEXICO OIL O REQUEST AUTHORIZATION TO TR	FOR ALLOWABLE AND	SSION	Form C-104 Supersedes Old Effective 1-1-6		
	LAND OFFICE						
	IRANSPORTER GAS		RECEIVED				
_	OPERATOR PRORATION OFFICE		Δ	NUG 2 9 1974			
1.	Operator Operator	1 700 4 7 13/4					
	Cities Ser	ARTESIA, OFFICE					
	P. 0. Box 1919 - Midland, Texas 79701 Reason(s) for filing (Check proper box) Other (Please explain)						
	New Well	Change in Transporter of:					
	Recompletion Oii Dry Gas Change in Ownership Casinghead Gas Condensate						
	If change of ownership give name and address of previous owner					<u></u>	
	- -			<u> </u>			
H.	Lease Name	Well No. Pool Name, Including F	Formation	Kind of Lease		Lease No.	
	Earl Spencer	l Wildcat - Ca	l Wildcat - Canyon Sta		tate, Federal or Fee Fee		
	Location	107/1 Nonth	1071		V		
	Unit Letter F;	1974 Feet From The North Lis	ne and 19/4	_ Feet From The	West		
	Line of Section 25 To	ownship IN Range	28E , NMFM,	De Baca		County	
III.	DESIGNATION OF TRANSPOR	CTER OF OIL AND NATURAL GA	Address (Give addres.; to	o which approved cop	py of this form is to	be sent)	
	Name of Authorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent)						
	None						
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge.	Is gas actually connecte No	d? When			
***	-	ith that from any other lease or pool,		number:			
IV.	COMPLETION DATA	Oll Well Gas Well	New Well Workover	Deepen Plug	Back Same Res	v. Diff. Rest	
	Designate Type of Complete	Date Compl. Ready to Prod.	X Total Depth		<u> </u>	<u>;</u>	
	Date Spudded 4-21-74	0 -1 -1	7030'	P.B.	т.D. 6850!	•	
	4-21-74 Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubi	ng Depth		
	4475' GR	Canyon	64571		63761	· · · · · · · · · · · · · · · · · · ·	
	4475' GR Canyon 6457' 6376' Perforations 2-0.41'' Holes each @ 6457', 6458', 6461', 6463', 6465', 6658' Depth Casing Shoe 6659', 6660', 6702', 6703', 6705', 6707', 6749', 6751', and 6753'. TUBING, CASING, AND CEMENTING RECORD						
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SE		SACKS CEM	ENT	
	12-1/411	8-5/8"	17321		950 Sxs. (Circ.)	
	7-7/8''	5-1/2"	69341		275 Sxs.		
V.	TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)						
	OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow,)		
	Length of Test	Tubing Pressure	Casing Pressure	Chok	• Size		
	Actual Prod. During Test	Oil-Bhis.	Water - Bbls.	Gas-	·MCF		
	GAS WELL		1				
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Grav	ity of Condensate		
	C.A.O.F. 248 Testing Method (pitot, back pr.)	1	Casing Pressure (Shut-	in) Chok	e Size	4	
1		1850#	_		113		
VI.	CERTIFICATE OF COMPLIAN	CE	OIL C	OIL CONSERVATION COMMISSION			
	I hereby certify that the rules and regulations of the Oil Conservation		APPROVED			9	
	Commission have been complied	with and that the information given e best of my knowledge and belief.	BY				
			TITLE				
			11 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1				

VI.

Echille
(Signature)
Posion Operation Manager

ion (Title)

1974 (Date) August 23,

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, well name or number, or transporter, or other such change of condition.

Senerate Forms C-104 must be filed for each need in multiple.