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U.S.G.S.			<u> </u>
LAND OFFICE			
TRANSPORTER	OIL		/
	GAS		1
OPERATOR		[2
PRORATION OFFICE			
Operator			

NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE AND

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

	U.S.G.S. AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS						
	LAND OFFICE OIL /			IIIN 1 0 1000			
	TRANSPORTER GAS /		·	JUN 1 9 1969			
	OPERATOR 2						
I.	Operator			ARTERIA, OFFICE			
	DEPCO, Inc.						
	800 Central, Odessa,	Texas 79760					
	Reason(s) for filing (Check proper box))	Other (Please explain)				
	New Well Recompletion	Change in Transporter of: Oil X Dry Ga:	s 🔲				
	Change in Ownership	Casinghead Gas Conden	sate				
	If change of ownership give name			•			
	and address of previous owner						
II. DESCRIPTION OF WELL AND LEASE Lease Name Lease No. Well No. Pool Name, Including Formation Kind of Lease Kind of							
	Artesia Unit	9 Arte	sia Queen Grayburg S	A State, Federal or Fee State			
	Location B . 380) Feet From The North Line	e and 2310 Feet Fro	m The East			
	Oill Letter						
	Line of Section 35 Tow	vnship 17 Range	28 , ммрм,	Eddy County			
II.	DESIGNATION OF TRANSPORT	or Condensate	S Address (Give address to which app	proved copy of this form is to be sent)			
	Navajo Refining Company, Pipe Line Division Artesia, New Mexico						
	Name of Authorized Transporter of Cas	singhead Gas 🔲 or Dry Gas 🗔	Address (Give address to which app	proved copy of this form is to be sent)			
	Phillips Petroleum C	Corporation Unit Sec. Twp. Rge.	Odessa, Texas Is gas actually connected?	When			
	If well produces oil or liquids, give location of tanks.	N 26 17 28	Yes	8-20-61			
W	If this production is commingled with COMPLETION DATA	th that from any other lease or pool,	give commingling order number:				
i V .	Designate Type of Completion	Oil Well 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			
			6				
V.	TEST DATA AND REQUEST FOOL WELL	able for this de	pth or be for full 24 hours)	oil and must be equal to or exceed top allow-			
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas	lift, etc.)			
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size			
	Actual Prod. During Test	Oil-Bbls.	Water-Bbis.	Gas - MCF			
	Actual Float During Float						
	GAS WELL						
	Actual Prod. Test-MCF/D	Length of Test	Bbis. Condensate/MMCF	Gravity of Condensate			
	Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size			
	resting Monace (prost, each proy						
VI.	CERTIFICATE OF COMPLIANCE	CE .	OIL CONSER	VATION COMMISSION			
	I hereby certify that the rules and r	egulations of the Oil Conservation	APPROVED , 19				
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. (Signature) Chief Production Clerk			By My J. L. Slamit				
			TITLE GIL AND GAS INSPECTOR				
			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.				
						(Title)	
							June 20, 1969

Separate Forms C-104 must be filed for each pool in multiply completed wells.

(Date)