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U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
RECEIVED AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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

MAR 12 1971

O. C. C.

I. OPERATOR

General American Oil Company of Texas

Address

P. O. Box 416, Loco Hills, New Mexico 88255

Reason(s) for filing (Check proper box)

New Well ☒ Change in Transporter of: Oil ☐ Dry Gas ☐
Recompletion ☐ Casinghead Gas ☐ Condensate ☐
Change in Ownership ☐

Other (Please explain)

CASINGHEAD GAS MUST NOT BE
FLARED AFTER 5-5-71
UNLESS AN EXCEPTION TO R-407
IS OBTAINED

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 Lease	Lease No.
Kealy A	18	Grayburg-Jackson & San Andres	State, Federal or Fee	Fed. LC-028784-a
Location				
Unit Letter	M	660'	Feet From The	S Line and 660' Feet From The W
Line of Section	13	Township	17-S	Range 29-E, NMPM, Eddy County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Navajo Refining Co., Pipeline Division	North Freeman Ave., Artesia, New Mexico 88210					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	K	24	17-S	29-E	NO	

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
	X		X					
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
2-7-71	2-15-71		3226'					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
3602' GL	Grayburg-Jackson		2479'		3100'			
Perforations			3115'-19'		Depth Casing Shoe			
2479'-89', 2514'-16', 2822'-24', 2873'-77', 2882'-86', 3032'-36',					3224' KB			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4"	8-5/8"		415' KB		100 Sacks			
7-7/8"	4-1/2"		3224' KB		325 Sacks			

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(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)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
3-5-71	3-5-71	Pumping	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 Hours			
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
100 Bbls.	100 Bbls.		

GAS WELL

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 COMPLIANCE

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.

W. E. Walter (Signature)

District Superintendent

March 11, 1971

(Date)

OIL CONSERVATION COMMISSION

APPROVED MAR 12 1971, 19

BY W. A. Gussert

TITLE OIL 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.

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 pool in multiply completed wells.

Keely A #18

This is a true and correct report to the best of my knowledge.

Signed before me this 12 day of March, 1971.

35.

70

DEVIATION SURVEYS

Keely A #18

Reflected

Reflected

1/2
1/2
1/2
1/2
1/2
1-1/2

413
308
1850
3323
3719
3220

This is a true and correct report to the best of my knowledge.

Signed before me this 11th day of March, 1971.

[Signature]