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

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

APR 17 1967

I. OPERATOR

Operator **Cities Service Oil Company**

Address **P. O. Box 69 - Hobbs, New Mexico 88240**

Reason(s) for filing (Check proper box) Other (Please explain)

New Well Change in Transporter of:

Recompletion Oil Dry Gas

Change in Ownership Casinghead Gas Condensate

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name State AD	Well No. 11	Pool Name, including Formation Hescalero Permian	Kind of Lease State, Federal or Fee	State State	Lease No. 9943
Location					
Unit Letter 0	800	Feet From The South	Line and 1980	Feet From The East	
Line of Section 22	Township 10S	Range 32E	NMPM, Lee		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"/> Texas-New Mexico Pipeline Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1510 - Midland, Texas
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> None	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 0 Sec. 22 Twp. 10S Rge. 32E Is gas actually connected? No When Used & Vented

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 <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 2-10-67	Date Compl. Ready to Prod. 4-13-67	Total Depth 9590	P.B.T.D. 9545					
Elevations (DF, RKB, RT, GR, etc.) 4343 DF	Name of Producing Formation Hescalero Permian	Top Oil/Gas Pay 9310	Tubing Depth 9540					
Perforations 9310, 9316, 9322, 9326, 9337, 9346, 9348, 9352 and 9356							Depth Casing Shoe 9590	
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
17	13 3/8	411	450 sack circ.					
12	8 5/8	3500	1950 sack circ.					
7 7/8	5 1/2	9590	680 sack					

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 3-29-67	Date of Test 4-13-67	Producing Method (Flow, pump, gas lift, etc.) Pump
Length of Test 24 hrs.	Tubing Pressure	Casing Pressure
Actual Prod. During Test	Oil - Bbls. 88	Water - Bbls. 15
		Gas - MCF 44.5

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.

OIL CONSERVATION COMMISSION

APPROVED _____, 19 _____

BY _____

TITLE _____

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.

 District Clerk
 April 17, 1967
 (Date)