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DISTRIBUTION			
SANTA FE	-		
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
INANSPORTER	GAS		
OPERATOR			

Jan. 7, 1971

(Date)

## NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE

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

FILE						AND					•
U.S.G.S.			AUTHOR	ZATION	TO TRA	NSPORT	OIL AND N	ATURAL G	SAS		
LAND OFFICE											
TRANSPORTER											
08551555	GAS	$\vdash$									
PROPATION OF	FICE	$\vdash\vdash$									
Operator Operator	FICE										
San Barrer											
Address				-							
225 Park C	ity Benk	mild	ing, High	land P	ark Vil	lage, [	allas, T	exas 752	05		
Reason(s) for filing	(Check proper	box)					Other (Please	explain)			. —
New Well	님		Change in T	ransporter (			# 17	a	<del></del>		
Recompletion	H		Oil Cartrahead	الله	Dry Ga Conden		- sapor	gas onl;	7		
Change in Ownersh	***		Casinghead	Jua 🔁	Conden	.~~··ē []					
If change of owne and address of pro		ne 									
. DESCRIPTION	OF WELL A	ND LE	ASE Well No. P	ool Name, 1	Including F	ormation		Kind of Leas	<u> </u>		Lease No.
	***		, ,	iarth R	agley I	enn		State, Federa	lor Fee	itate	K-3837
Location	244.40			WI VII D		-					-1 <u>,</u>
11-44 1 -44	<b>.</b>	660	Feet From '	The No.	T.in	e and 6	60	Feet From	The	Back	
Unit Letter	<b>A</b>						<del></del>	_			
Line of Section	30	Townsh	nip 11 S		Range	33 B	, NMPM,	Loc			County
		-									
. DESIGNATION						S	Give address t	o subjeb appro	and come of the	hie form is 1	o he sent!
Name of Authorize	- //-	IIUNI	or Con	densate [	_		Knoxvil				
Service P		f Cantac	head Gas F	or Dry G	igs T		Give address t				
Name of Authorize	1911 1	- Jaing	Head Gas	JI DIY G		1	63, Hobbi				,
Vaper Sys	-	1111	nit Sec.	Twp.	Rge.		tually connecte		en		
If well produces o		1	4 30	118	33B	Yes			10/6/70		
<u> </u>			<u> </u>				ingling arder				
If this production COMPLETION		a with t	nat from any	otner leas	se or pool,	Rive comp	mikring order	number:	<del></del>		
		1		Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res	s'v. Diff. Res'
Designate T	Type of Comp	letion -	- (A)			<u> </u>			-	!	<u> </u>
Date Spudded		De	ate Compl. Red	dy to Prod	l.	Total De	oth		P.B.T.D.		
						<del> </del>			<u> </u>		
Elevations (DF, R	KB, RT, GR, e	tc.j N	ame of Product	ing Formati	lon	Top Oil/	Gas Pay		Tubing De	ptn	
							<del></del>		Depth Cas	ing Shoe	
Perforations											
			TII	BING CA	SING. AN	D CEMEN.	TING RECOR	D			
HO!	E SIZE			TUBING			DEPTH SE		S	SACKS CE	MENT
HOL			2								
TEST DATA A	ND REQUES	T FOR	ALLOWAB	LE (Te	st must be d	ifter recove	ry of total volu	me of load oil	and must be	equal to or	exceed top all
OIL WELL				abl	e for this d		or full 24 hours		ife as 1		
Date First New C	il Run To Tank	• D	ate of Test			Producin	g Method (Flow	v, pump, gas i	sji, ElC.j		
			lubia - Barra			Casing F	TORRITE		Choke Siz	•	
Length of Test		T	ubing Pressure	•		Cusing	. 355 W G			-	
Actual Prod. Duri	Ing Test	<del>-  </del> -	Oil-Bbls.		Water - Bbls.		Gas - MCF				
Actual Prod. Dur	and rear		<u></u>								
<u> </u>											
GAS WELL											
Actual Prod. Tes	it-MCF/D	L	ength of Test			Bbls. Co	ndensate/MMC	F	Gravity of	Condensate	•
		1	_								
Testing Method (	pitot, back pr.)	Т	ubing Pressur	• (Shut-L	n )	Casing F	ressure (Shut	:-in)	Choke Siz	:•	
I. CERTIFICATI	E OF COMPI	LIANCE					OIL	CONSERV	ATION CO	OIRSIMMC	N
						1	$\gamma$		1077		
I hereby certify	that the rules	and reg	rulations of the	he Oil Co	nservation	11	OVED	1 1	<del>19</del> 11		, 19
Commission has above is true a	e heen compl	liad wit	h and that t	ha intorma	ition given	111	LACE	HA	men/		
above is true a	na complete t	to the p	estormy Kr	TOWIEGE (	AEITEI.		CHOCK	R D	137	•	
	`	_				TITK	E		y 19	<del></del>	
Q	' /	Q				/ -	his form is t	o be filed in	compliance	with RUL	E 1104.
	mm /	Low	~~			il		605 6114	weble for a	newly dril	led or deeper
	FFV ·	(Signatu	ire)				this form mustaken on the	the secome	senied by a	tabulation	OI (De Gevier
One	erator					tests	taken on the	Anti III ECC	met he fille	d out come	letely for all
(Title)		able	all sections on new and re	completed t	vells.	comb					
						11					_

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.

RECEIVED

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OIL CONSERVATION COURT.

NO. OF COPIES RECEIVED					
DISTRIBUTION	NEW MEXICO OIL	CONSERVATION COMMISSION			
SANTA FE			Form C-104 Supersedes Old C-104 and C-1		
FILE	HOBI	FOR ALLOWABLE BS ANDICE O. G. G.	Effective 1-1-65		
U.S.G.S.			0.16		
LAND OFFICE	AUTHORIZATION TO TR	ANSPORT OIL AND NATURAL	_ GAS		
TRANSPORTER GAS	NAI I	त्र ११ क्षेत्र साम्राम्ब			
OPERATOR					
PRORATION OFFICE					
Operator	1		· · · · · · · · · · · · · · · · · · ·		
Address					
Reason(s) for filing (Check proper		Other (Please explain)			
New Well	Change in Transporter of:	Omer (Freuse explain)			
Recompletion	Oil Fi Dry G	_	<i>1</i> 63		
	= '` '	<b>=</b>			
Change in Cwnership	Casinghead Gas Conde	ensate			
If change of ownership give name and address of previous owner _	ie				
DESCRIPTION OF WELL AT	ND LEASE Mell No. Pool N	th Bugley-Pennsy	/Uanian   Kind of Lease		
Challens - 3 17	4	A Rocins (Lann Fern)	State, Federal or Fee		
Location	77 1	P-3688	State, Federal of Fee		
Location	6.39	69B			
Unit Letter;		ne and Feet Fro			
Line of Scotton 39	Township 3 S	A STATE OF THE STA	Les		
Line of Section ,	Township Range	, NMPM,	County		
Name of Authorized Transporter of	ORTER OF OIL AND NATURAL G. Oil (5) or Condensate [	Address (Give address to which ap	proved copy of this form is to be sent)		
	Amoco Pipeline Cu.  Casinghead Gas A or Dry Gas		rille Ave., Leibook., Texas		
Server for Ca.		Box 1589,	Tulsa, Oklahyan 74100		
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. A 30 III VSE	Is gas actually connected? When			
If this production is commingled COMPLETION DATA	with that from any other lease or pool,	give commingling order number:			
Designate Type of Compl	etion $= (X)$   Cil Well   Gas Well	New Well Workover Deepen	Plug Back   Same Res'v. Diff. Res'v		
Date Spudded	Date Compl. Ready to Prod.	Total Deptia	P.B.T.D.		
[rool	Name of Producing Fermation	Top Oil/Gas Pay	Tubing Depth		
Perfcrotions			Depth Casing Shoe		
	TUBING, CASING, AN	D CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
		1			
TEST DATA AND REQUEST	FOR ALLOWARIE	after recovery of total scales of 1. 1	oil and must be equal to or exceed top allow		
OIL WELL		after recovery of total volume of load o epth or be for full 24 hours)	on and must be equal to or exceed top allor		
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas	s lift, etc.)		
Length of Test	Tubing Fressure	Casing Fressure	Choke Size		
Actual Frod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF		
·					
GAS WELL					
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate		
resting Method (pitot, back pr.)	Tubing Pressure	Casing Fressure	Choke Size		
			•		
CERTIFICATE OF COMPLI	ANGE		VATION COMMISSION		

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.

		,
Ture Law	(Signature)	uis
	(Title)	

(Date)

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 Sections I, II, III, and VI only 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.