HO. OF COPIES REC	EIVED	
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SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		

NEW MEXICO OIL CONSERVATION COMMIL N REQUEST FOR ALLOWABLE AND

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

U.S.G.S.	_ AUTHORIZATION TO TRA	ANSPORT OIL AND NATURAL	GAS	
LAND OFFICE			,	
TRANSPORTER OIL	_			
GAS				
OPERATOR				
PROPATION OFFICE				
Operator				
	t Company of Texas			
Address				
	t, Amarillo, Texas 79101			
Reason(s) for filing (Check proper box		Other (Please explain)		
New Well	Change in Transporter of:			
Recompletion	Oil Dry Ge	-		
Change in Ownership	Casinghead Gas Conde	nsate		
If change of ownership give name				
and address of previous owner				
I. DESCRIPTION OF WELL AND	Well No. Pool Name, Including F	ormation Kind of Leas	se Legse No.	
Lease Name				
SFPRR Location	4 West Sawyer (San Andres)	d or Fee	
	ar 12	1720	To at	
Unit Letter B ; 660	Feet From The North Lir	ne and <u>1780</u> Feet From	The East	
22	wnship 9S Range	37E , NMPM, I		
Line of Section 33 To	wnship 95 Range	3(E , NMPM, I	ea County	
T PROJECT ARTON OF TRANSPOR	TED OF OIL AND NATURAL CA	i e		
Name of Authorized Transporter of Oil	TER OF OIL AND NATURAL GA	Address (Give address to which appro	oved copy of this form is to be sent)	
Name of Authorized Transporter of Ca	orporation singhead Gas or Dry Gas	P. O. Box 900, Dalla Address (Give address to which appro	oved copy of this form is to be sent)	
Additional and Additi	,			
	Unit Sec. Twp. P.ge.	Is gas actually connected? Wi	nen	
If well produces oil or liquids, give location of tanks.		1		
	G 33 9S 37E	<u> </u>		
If this production is commingled wi	th that from any other lease or pool,	give commingling order number:		
V. COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.	
Designate Type of Completic	on - (X)			
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
8-10-70	8-24-70	5025	5004	
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
		4932'	5001'	
3977 RKB	San Andres	1 47.14	Depth Casing Shoe	
4932-381, 4956-82) !	5025 '		
TUBING, CASING, AND CEMENTING RECORD				
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
12-1/4"	8-5/8"	398!	300 sx Class A	
7-7/8"	4-1/2"	50251	250 sy 50-50 Pozmiy	
1.11	2-3/8"	5001'		
	2-3/0			
V. TEST DATA AND REQUEST F	OP ALLOWARIE (Test must be a	fter recovery of total volume of load oil	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 !	ift, etc.)	
8-21:-70	8-30-70	Pumo		
8-21:-70 Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
24 hours				
Actual Prod. During Test	Oil-Bbls.	Water-Bble.	Gas-MCF	
149 BF	122	27	76.2	
		•	·	
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	
I. CERTIFICATE OF COMPLIAN	CE	OIL CONSERVATION COMMISSION		
I hereby certify that the rules and regulations of the Oil Conservation APPROVED				
Commission have been complied to	with and that the information given	ation given A A A A A A A A A A A A A A A A A A		
above is true and complete to the	Dest of my knowledge and belief.	THE STATE OF THE S		
		TITLE		
- 12 n - 2		This form is to be filed in compliance with RULE 1104.		
Fred 11 Have	l l	versule is a request for allowable for a newly drilled or deepened		
This form is to be filed in compliance with RULE 1104. If this is a request for silowable for a newly drilled or deepen well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.				
101	atura)	well, this form must be accompa	fuled by a tapatation of the deviction	

(Title)

1970

August 31, 19 (Date)

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