NO. OF COPIES REC	EIVLD	1	
DISTRIBUTION			
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PROBATION OF			

NEW MEXICO OIL CONSERVATION COMMIS 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					
	IRANSPORTER OIL]				
	GAS					
	OPERATOR	1				
.	PROPATION OFFICE	1				
•	Operator					
	Cil Derelomment	Commany of Beyes				
i	Cil Development Company of Texas					
	000 D -33- (:t	amendale Heree 70101				
	Reason(s) for filing (Check proper box	Amarillo, Texas 79101	Other (Rienza washnin let a	CI RETOWN STAND		
	$\overline{}$	Oil Dry G	FLAUDD AFTER			
	Recompletion			PTION TO E-4076		
	Change in Ownership Casinghead Gas Condensate IS OBTAINED.					
	If change of ownership give name	THIS WILL HAS DEED				
	and address of previous owner	DESIGNATION OF THE PROPERTY OF	N PLACED IN THE POOL			
	and address of previous owner DESIGNATED BELOW. IS YOU DO NOT CONCUR. NOTIFY THIS OFFICE.					
II.	II DESCRIPTION OF WELL AND LEASE					
	Lease Name	Well No. Pool Name, Including F	Formation R-4106 Kind of Leas	1 1		
	Federal "22"	1 est Sawyer ((San Andrea) State, Federa	al or Fee Federal NMO50475		
	Location					
	s 660 man south as 1.80 marks West.					
	Unit Letter 1, OX	reet from the DORGIL LI	reet rrom			
	Line of Section 22 Township & Range 37%, NMPM, Lies. County					
	Line of Section 22 Tox	visinp G) iii	<u>Dea</u>		
	DESCRIPTION OF SPANSTON	TED OF OH AND NATURAL C	AE			
111.	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)		
	Mobil Pipeline Corpor	ation	P.O. Bo. 900, Dallas,	Lexas		
Name of Authorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form				year copy of this ferm to to be com,		
			lo lo			
	If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected?	nen		
	give location of tanks.	N 22 98 37E	No			
	If this andustics is commissed wi	th that from any other lease or pool,	give commingling order number:			
IV	COMPLETION DATA	th that from any other reads of poor,				
		Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Restv. Diff. Restv.		
	Designate Type of Completic	$\operatorname{on} - (X)$	v			
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
	·	1-15-71	5050°	5031*		
	l=5=71 Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth		
			4950*	5000		
	Perforations	San Andres	495	Depth Casing Shoe		
				5050		
	49591-821		ID CENENTING BECORD	1 3030		
		T	ID CEMENTING RECORD	SACKS CEMENT		
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
	11"	8-5/8"	450'	325		
	7=7/8"	4-1/2"	5050	250		
):=1 /2"	2-3/8"	50001			
		J	1	<u> </u>		
v	TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be	after recovery of total volume of load oil	l and must be equal to or exceed top allow-		
٠.	OIL WELL	able for this d	iepth or be for full 24 hours)			
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas i	ujt, etc.)		
	1-20-71	1-29-71	Pumo			
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size		
	Actual Prod. During Test	Oil-Bbis.	Water-Bbls.	Gas-MCF		
		21	62	20.4		
	83 BF					
CAC WEST Y						
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate		
	Acidal Find, 1881- MCLVD					
		The Control of the Co	Casing Pressure (Shut-in)	Choke Size		
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Commit : 1000 ma famata and 1			
VI.				ATION COMMISSION		
			\parallel () FEB 1.3	FEB 1,197T)		
	I hereby cartify that the sules and	regulations of the Oil Conservation	APPROVED	, 19		
	C	with and that the intormation given		.07		
	above is true and complete to the best of my knowledge and belief.		BY	men ser i		

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.

January

WHERVISOR DISTRICT !

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

RECEIVED

v . . . v

OIL CONSERVATION COMMI