_	-	· · · · · · · · · · · · · · · · · · ·	-		
ſ	NO. OF COPIES RECEIVED				
ı	DISTRIBUTION	NEW MEYICO OU CO	ONSERVATION COMMISSION	Form C-104	
f	SANTA FE		FOR ALLOWABLE	Supersedes Old C-104 and C-110	
ł	FILE	. KEQUEST 1	AND	Effective i-1-65	
}					
1	U.S.G.S.	AUTHORIZATION TO TRA	NSPORT OIL AND NATURAL GA	AS	
l	LAND OFFICE				
[	VEAUGEOUVED OIL				
	TRANSPORTER GAS				
- }	OPERATOR				
1					
I.	PRORATION OFFICE				
	Operator				
	John L. Cox				
	Address				
	408 West Wall, Mic	dland, Texas 79701			
	Reason(s) for filing (Check proper box)		Other (Perpersylain)	10 10	
	المنا الم	Change in Transporter of:	Othe CASINGHEAD G	13 MUST NOT BE	
	New We!!		FLARED AFTER	9/26/13	
	Recompletion	OII Dry Gas	UNLESS AN EXC	EPTION TO BANK	
	Change in Ownership	Casinghead Gas Conden	IS OBTAINED	21011 20 16-4919	
	If change of ownership give name				
	and address of previous owner			x: v	
II.	DESCRIPTION OF WELL AND I	LEASE			
	Lease Name	Well No. Pool Name, Including Fo		Lease No.	
	Federal	l West Sawver	(San Andres) State, Federal	or Fee Federal 050475	
		1 1000 200702	\\ \( \)	<u> </u>	
	Location		0.5.0		
	Unit Letter P ; 66	O Feet From The S Lin	e and 810 Feet From T	he East	
	,,				
	Line of Section 22 Tow	mship 9S Range	37E , NMPM,	Lea County	
	Line of Section 22 Tow	manip 35 range	<u> </u>		
			_		
111.	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA	S		
	Name of Authorized Transporter of Oil	🐧 or Condensate 🗌	Address (Give address to which approv	ed copy of this form is to be sent)	
	Mobil Oil Corpora		Box 900, Dallas, Te	exas 75201	
	Name of Authorized Transporter of Cas	Inghed Gas X or Dry Gas To	Address (Give address to which approv	ed copy of this form is to be sent)	
	i	induedd Gds [X] Of Dry Gds [	Tradices (office and one of an inter-		
	None Designated				
		Unit Sec. Twp. Rge.	Is gas actually connected? Whe	n	
	If well produces oil or liquids,	P 22 9S 37E	No.		
	give location of tanks.	1 - 1 1	No No		
	If this production is commingled wit	th that from any other lease or pool,	give commingling order number:		
IV	COMPLETION DATA	•			
a <b>v</b> .		Oil Well Gas Well	New Well Workover Deepen	Plug Back   Same Res'v. Diff. Res'v.	
	Designate Type of Completion	on = (X)	x	1 1	
				P.B.T.D.	
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.1.D.	
	7-9-73	7-22-73	5085		
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
	1	San Andres	4997	4950	
	3966 GR	San Andres	4001	Depth Casing Shoe	
	Perforations			, ,	
	4997-5009 w/7 holes 5085				
		TUBING, CASING, AND	D CEMENTING RECORD		
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
		8 5/8"	433'	375 sx.	
	121/4"			250 sx.	
	7 7/8"	41/2"	5085	230 SX.	
		OD ATTOMADE	Annual Control of the state of	and must be sound to as avosed ton allow	
V.	TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allow able for this depth or be for full 24 hours)				
	OIL WELL		Producing Method (Flow, pump, gas li)	fr etc.	
	Date First New Oil Hun To Tanks	Date of Test	Flowing	-,,	
	7-22-73	7-23-73		<b></b>	
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
	24 Hrs.	200		24/64"	
	Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	Gas-MCF	
	Actual Prod. During 1881		10	56	
		193	T 70		
	GAS WELL			.,	
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
		Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
	Testing Method (pitot, back pr.)	I uning Pressure (Sauc-14)	Casing 1 tasoms (Chillian		
				<u> </u>	
.,,	. CERTIFICATE OF COMPLIANCE		OIL CONSERMA	TIAN-COMMISSION	
٧I	CERTIFICATE OF COMPLIANCE			- 26 19/3	
			APPROVED A	, 19	
	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.		SUPERVISOR DISTRICTOR P		
			TITLE SOLDER VID THE SOLD I		
			II //		
	\ \ \	<b>'.</b>	This form is to be filed in	compliance with RULE 1104.	
	Merita Stillenback		reastance manuage for allow	wable for a newly drilled or deepene	
	VI Greta Stillarton		it is a form must be accomps	injed by a tabulation of the deviatio	
	(Signature) 1		tests taken on the well in acco	rdance with RULE 111.	
	Production Clerk		All sections of this form mu	ist be filled out completely for allow	
	(Title)		able on new and recompleted w	ells.	
	(1	itle)	apis on new and recomplated w		
	July 24, 1973	itle)	Eill out only Sections I I	I, III, and VI for changes of owner ter, or other such change of condition	

Separate Forms C-104 must be filed for each pool in multiply

## July 23, 1973

Deviation surveys taken on John L. Cox's Federal #1, Section 22, T-9-S, R-37-E, Lea County, New Mexico.

Depth	Degree
433	1/2
9 <b>2</b> 8	3/4
1395	1
1895	1
2198	1 1/4
2572	1
3061	3/4
3919	1/2
4364	3/4
4469	1/2
4643	1/2
4829	3/4
5010	1/4
5085	1/4

I hereby certify that I have personal knowledge of the data and facts placed on this sheet, and that such information given above is true and complete.

Sitton and Norton Drilling Company

Before me, the undersigned authority, on this day personally appeared Sherman H. Norton, Jr., known to me to be the person whose name is subscribed hereto, who, after being duly sworn, on oath states that he is the drilling contractor of the well identified in this instrument and that such well was not intentionally deviated from the vertical whatsoever.

Sherman H. Norton. Jr.

Sworn and subscribed to before me, this the & day of July, 1973.

Notary Public in and for Lubbock County, Texas.

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