NO. OF COPIES RECE	EIVED	
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SANTAFE		
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
- AND SKILK	GAS	
OPERATOR		
PRORAT ON OFF		
<u> </u>		

## NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE

Form C-104
Supersedes Old C-104 and C-110

[	FILE		]	AND		Effective 1-1	·65	
Ī	U.S.G.S.		AUTHORIZATION TO TRA		ND NATUDAL	CAC		
r	LAND OFFICE		AOTHORIZATION TO TRA	ANSPORT OIL A	ND NATURAL	GAS		
Ī	01		1					
	FRANSPORTER GA	s						
	OPERATOR							
1.	PRORAT ON OFFICE							
	Operator							
-	I. J. Wolfson & Weldon S. Guest dos Chaves Oil Ltd.							
	Address							
	c/o Oil Reports	& Gas S	ervices, Inc., Box 763,	Hobbs. New	Merrico 889/	0		
	Reason(s) for filing (Che	ck proper box,		Other (F	lease explain)			
	New We,1		Change in Transporter of:					
	Recompletion		Oil Dry Go	s Effe	ctive 12/1/	ולי		
L	Change in ( ship		Casinghead Gas Conde	nsate				
7	f change / ownership	vive name						
	and address of previous	owner	hillips Petroleum Co.,	Odessa. Town	79760			
					- 17100			
u. j	DESCRIPTION OF W	ELL AND						
1	Lease Name	Tr. 7	Well No. Pool Name, Including F	ormation	Kind of Leas		Lease No.	
ļ	West Cap Queen	Send lini	t Caprock Queen	Cheves	State, Feder	State_	B-10/19	
	Location							
	Unit Letter	:6	60 Feet From The Rest Lin	ne and1986	Feet From	The South		
				-				
Ĺ	Line - Section	7 Tov	vnship 11.8 Range	31E . 1	IMPM, C	haves	County	
				-		-		
I. j			or Condensate			oved copy of this form is		
	Name of Authorized Tran		• • ·	Address (Give ada	ress to which appro	oved copy of this form is	to be sent)	
ŀ	Texas-New Mexic	o Pipeli	ne Co.	Box 1510	, Midland,	Towns 79701 oved copy of this form is		
į	Name or Authorized Tran	sporter of Cas	singhead Gas or Dry Gas	Address (Give ada	ress to which appro	oved copy of this form is	to be sent)	
-	None		Transition I Day	T	10			
İ	If well produces oil or lie	juids,	Unit Sec. Twp. Rge.	Is gas actually con	nected? wi	hen		
Ĺ	give location of tanks.		1 17 148 31E	No	<u> </u>			
I	f this production is cor	nmingled wit	h that from any other lease or pool,	give commingling	order number:			
۱. إ	COMPLETION DATA		TOU Wall	I brown Wroth I Wrong			1 10/4 5	
ŀ	Designate Type of	Completio	on - (X)	New Well Work	ver Deepen	Plug Back   Same Re	es'v. Diff. Res'v.	
	J		<u></u>				L	
- 1	Date Spudded		Date Compl. Ready to Prod.	Total Depth		P.B.T.D.		
-						T. V D Al		
	Elevations (DF: RKB, RT	, GR, etc.	Name of Producing Formation Top Oil/Gas Pay			Tubing Depth		
Ļ	Defeation				Depth Casing Shoe			
	Perforations Depth Casing Shoe							
-								
-			TUBING, CASING, AND	T				
-	HOLE SIZE	<u> </u>	CASING & TUBING SIZE	DEPT	HSET	SACKS CE	MENT	
_								
-								
-				ļ				
Ĺ			<u> </u>	1				
	TEST DATA AND RE	QUEST FO	OR ALLOWABLE (Test must be a	fter recovery of total opth or be for full 24		and must be equal to or	exceed top allow-	
	OIL WELL  Date First New Oil Run 7	i- Manha	Date of Test	Producing Method		(ft. etc.)		
İ	Date First New Cil Run T	o Tanks	Date of Peat	Producing Method	rtow, pump, gas t	iji, etc.)		
L		<del></del>		Control December 1		Choke Size		
	Length of Test		Tubing Pressure	Casing Pressure		Choke Size		
-				Water - Bbls.		Gas-MCF		
	Actual Prod. During Test		Oil-Bbls.	Water - Bbis.		G WB - MICT		
L			<u> </u>					
	GAS WELL			Tax.				
	Actual Prod. Test-MCF/	ם	Length of Test	Bbis. Condensate/	MMCF	Gravity of Condensat		
L								
	Testing Method (pitot, ba	ck pr.)	Tubing Pressure (Shut-in)	Casing Pressure (	Shut-in )	Choke Size		
L				<u> </u>				
I. (	CERTIFICATE OF C	OMPLIANO	CE C	0	IL CONSERVA	ATION COMMISSIO	N	
	hereby certify that the rules and regulations of the Oil Conservation ommission have been complied with and that the information given bove is true and complete to the best of my knowledge and belief.			APPROVED JAN 24 19/2 Orig. Signed by				
Ţ			APPROVED_					
-			BY John Runyan Geologist					
			TITLE		cologist			
	<i>Y</i>							
	11	,	11.1/2	This form is to be filed in compliance with RULE 1104.				
_	lle	noch	Ixal les	If this is a request for allowable for a newly drilled or deepe well, this form must be accompanied by a tabulation of the deviation.			led or deepened	
			<del></del>					
		(Signa	ture)	tests taken on	the well in acco	ordance with RULE 11	1.	
_		(Signa	ture)	tests taken on	the well in acco	ordance with RULE 11 ust be filled out comp	1.	

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O.L. Company of the lands

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JAN 2 1..2

OIL CONSESSATION COULD.