NO. OF COPIES REC	EIVED	İ	
DISTRIBUTION			
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS	ļ	
OPERATOR		ļ	
		ì	l

ATION COMMISSION

Form C-104

Old C-104 and C-110

DISTRIBUTIO		l	NEW MEXICO OIL CONSERVATION COMMI		
SANTA FE FILE U.S.G.S.			REQUEST FOR ALLOWABLE		
			AND		
			AUTHORIZATION TO TRANSPORT OIL AN		
LAND OFFICE			AUG ZI R 2.		
TRANSPORTER	OIL				
	GAS				
OPERATOR					

SANTA FE	REQUEST	Supersedes Old C-104 and C-11 Effective 1-1-65		
FILE	AND COLORED		1	
U.S.G.S.	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS			
LAND OFFICE	\dashv	AUG ZT 8 33 11 '61	7	
TRANSPORTER OIL	_	al 01	•	
GAS				
OPERATOR				
PRORATION OFFICE Operator				
Shell Oil Company	(Western Division)			
Address Post Office Box 1	509, Midland, Texas 79701			
Reason(s) for filing (Check proper be		Other (Please explain)		
New Well	Change in Transporter of:			
Recompletion	Oil X Dry Ga	ıs 🔲		
Change in Ownership	Casinghead Gas Conder	nsate		
If change of ownership give name				
and address of previous owner		Z 1	V	
II. DESCRIPTION OF WELL AND	Vell No. Pool and DESIGN	(at 05an An)	ase Lease No.	
Lease Name	1 Cato (San And	ST. 1 1	NM	
Brown Pederal "A"	T Caro (san And	, , ,	02/0225	
Location Unit Letter D 6	Feet From The North Lin	ne and 660 Feet From	m The West	
on Letter		30-E , NMPM,	Chaves County	
II. <u>DESIGNATION OF TRANSPO</u>	RTER OF OIL AND NATURAL GA	IS	proved copy of this form is to be sent)	
Name of Authorized Transporter of C	or Condensate	P. O. Box 900, Dallas		
Mobil Pipe Line			roved copy of this form is to be sent)	
Name of Authorized Transporter of C	Casinghead Gas or Dry Gas	address to write app		
16 wall made as -11 12 - 13.	Unit Sec. Twp. Rge.	Is gas actually connected?	When	
If well produces oil or liquids, give location of tanks.	D 26 8-S 30-E	No		
	with that from any other lease or pool,	give commingling order number:	· 	
If this production is commingled (IV. COMPLETION DATA			Dive Beek Com But 1977	
Designate Type of Comple	tion - (X) Gas Well	New Well Workover Deepen	Plug Back Same Restv. Diff. Restv.	
	A	S Total Depth	P.B.T.D.	
Date Spudded	Date Compl. Ready to Prod.	Total Depth 3685	3580 °	
7-26-67	8-6-67 Name of Producing Formation	Top Oil XOG XP(y)	Tubing Depth	
Elevations (DF, RKB, RT, GR, etc. 4170 DF	Name of Producing Formation San Andres	3532'	3442'	
4170' DF Perforations 3532' 3537'	, 3542', 3544', 3547', 354		Depth Casing Shoe	
3563', 3566'	, 3346 , 3344 , 3347 , 334	, , ,	36831	
3303 , 3300	TUBING, CASING, AN	D CEMENTING RECORD		
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
12 1/4"	9 5/8"	462'	300	
7 7/8"	5 1/2"	36831	350	
1110				
			<u>i.</u>	
V. TEST DATA AND REQUEST	FOR ALLOWABLE (Test must be a	after recovery of total volume of load o	oil and must be equal to or exceed top allou	
OIL WELL	able for this a	epth or be for full 24 hours) Producing Method (Flow, pump, gas	lift. etc.)	
Date First New Oil Run To Tanks	Date of Test			
8-6-67	8-17-67	Casing Pressure	Choke Size	
Length of Test	Tubing Pressure	Castild 1 1000mg		
24 Hours	Oil - Bbls.	Water - Bbls.	Gas - MCF	
Actual Prod. During Test		7	19	
74	67		***	
GAS WELL				
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
		Casing Pressure (Shut-in)	Choke Size	
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Cdsind Pressure (sauc-in)	CHARA OTTA	
VI. CERTIFICATE OF COMPLIA	INCE	OIL CONSER	VATION COMMISSION	
VI. OLIVIII IONILLI OI OOMILLI			* ***********************************	
I hereby certify that the rules ar	nd regulations of the Oil Conservation	APPROVED	, 19	
Camping hove been complied	d with and that the information given			
above is true and complete to	the best of my knowledge and belief.			
		TITLE		
Original Signed 1	3 y		in compliance with BULF 1104.	

Original Signed By J. R. Collnick	_بحور	K. W. Le	grone
(Sign	atur a)		
Division Producti	on Super	intendent	
(Ti	tle)		
August 18	1967		
(De	ite)		

PPBOVED	, 19
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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 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.

