	NO. OF COPIES RECI	EIVEO
	DISTRIBUTIO	ON
	SANTA FE	
	FILE	
	U.S.G.S.	
	LAND OFFICE	
	TRANSPORTER	OIL
		GAS
	OPERATOR	
i.	PRORATION OF	FICE
	Operator	

## NEW MEXICO OIL CONSERVATION COMMISSION

Change of ownership   Casinghead Gas   Condensate	ansporter of gas
Candidate   Case   Ca	
TRANSPORTER   OIL   GAS   OPERATOR   PRORATION OFFICE	ansporter of gas
PROPATION OFFICE   PROPATION OFFICE   PROPATION OFFICE	ansporter of gas
PROPATION OFFICE   Bell Petroleum Company	ansporter of gas
Comparison   Sell Petroleum Company	ansporter of gas
Bell Petroleum Company  Address P. O. Box 1538 - Midland, Texas 79701  Reason(s) for filing (Check proper box) New Well Recompletion Change in Comership Cosinghead Gas  If change of ownership give name and address of previous owner  II. DESCRIPTION OF WELL AND LEASE Lease Name Packer-Federal 1 Cato San Andres  Location Unit Letter I'All 660 Feet From The North Line and 660 Feet From The Line of Section 33 Township 8-S Range 30-E, NMFM,  III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  Name of Authorized Transporter of Casinghead Gas To Dry Gas Address (Give address to which Cities Service Oil Company If well produces oil or liquids, give location of tanks.  If this production is commingled with that from any other lease or pool, give commingling order number IV. COMPLETION DATA  Designate Type of Completion — (X)  Date Spudded  Date Compl. Ready to Prod.  Tubing, CASING, AND CEMENTING RECORD  HOLE SIZE  CASING & TUBING, CASING, AND CEMENTING RECORD  TUBING, CASING, AND CEMENTING RECORD  TUBING, CASING, AND CEMENTING RECORD	ansporter of gas
Reason(s) for filing (Check proper box)  New Weil Change in Transporter of: Recompletion Oil Dry Gas Designate to Casinghead Gas Condensate  If change of convership give name and address of previous owner  II. DESCRIPTION OF WELL AND LEASE  Lease Name Packer-Federal 1 Cato San Andres  Location  Unit Letter "A" 660 Feet From The North Line and 660 Feet Full Line of Section 33 Township 8-S Range 30-E, NMFM,  Norte of Authorized Transporter of Cit or Condensate Talenthrise of Casinghead Gas Talenthrise (Titles Service Oil Company  If well produces oil or liquids, que location is commingled with that from any other lease or pool, give commingling order number IV. COMPLETION DATA  Designate Type of Completion — (X)  Date Spudded Date Completion — (X)  Perforations  TUBING, CASING, AND CEMENTING RECORD	ansporter of gas
Reason(s) for filing (Check proper box)    Reason(s) for filing (Check proper box)   New Well	ansporter of gas
Reason(s) for filing (Check proper box)  New Well  Recompletion  Change in Transporter of:  Change in Condensate  If change of ownership give name and address of previous owner  II. DESCRIPTION OF WELL AND LEASE  Lease Name  Packer—Federal  Location  Unit Letter  "All 660 Feet From The North Line and 660 Feet From The Line of Section 33 Township 8—S Range 30—E , NMPM,  III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  Name of Authorized Transporter of Cusinghead Gas  or Dry Gas Address (Give address to which Cities Service Oil Company  If well produces oil or liquids, give location of tanks.  If this production is commingled with that from any other lease or pool, give commingling order number IV. COMPLETION DATA  Designate Type of Completion — (X)  Date Spudded  Date Compl. Ready to Prod.  Total Depth  Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation  TUBING, CASING, AND CEMENTING RECORD  HOLE SIZE  CASING & TUBING SIZE  DEPTH SET	ansporter of gas
Change in Ownership   Change in Transporter of:   Cil	ansporter of gas
Recompletion	ansporter of gas
Change of ownership   Casinghead Gas   Condensate	
If change of ownership give name and address of previous owner  II. DESCRIPTION OF WELL AND LEASE  Lease Name   Well No.   Pool Name, Including Formation   Kind of Packer-Federal   1   Cato San Andres   State, F    Location   Unit Letter   "A"   660   Feet From The   North   Line and   660   Feet F    Line of Section   33   Township   8-S   Range   30-E   NMPM,    III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS   Name of Authorized Transporter of Cli   or Condensate   Address (Give address to which      Name of Authorized Transporter of Casinghead Gas EX   or Dry Gas   Address (Give address to which	
II. DESCRIPTION OF WELL AND LEASE  Lease Name	
Lease Name	
Packer-Federal  Location  Unit Letter "A" : 660 Feet From The North Line and 660 Feet F  Line of Section 33 Township 8-S Range 30-E , NMPM,  III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  Name of Authorized Transporter of Oil or Condensate Address (Give address to which of Authorized Transporter of Casinghead Gas T or Dry Gas Address (Give address to which of Cities Service Oil Company  If well produces oil or liquids, give location of tanks.  If this production is commingled with that from any other lease or pool, give commingling order number IV. COMPLETION DATA  Designate Type of Completion — (X)  Date Spudded  Date Compl. Ready to Prod.  Total Depth  Elevations (DF, RKB, RT, GR, etc., Name of Producing Formation Top Oil/Gas Pay  Perforations  TUBING, CASING, AND CEMENTING RECORD  HOLE SIZE  CASING & TUBING SIZE  DEPTH SET	anno Ma
Cocation	
Unit Letter "A" 660 Feet From The North Line and 660 Feet Flow The Line and 660 Feet Flow The Line and 660 Feet Flow The Line and 30-E NMPM,  III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS    Name of Authorized Transporter of Cil	NM-035442
Line of Section 33 Township 8-S Range 30-E, NMPM,  III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS    Name of Authorized Transporter of Cil	Fact
Name of Authorized Transporter of Cili or Condensate Address (Give address to which Cities Service Oil Company  If well produces oil or liquids, qive location of tanks.  A 33 88 30E  Tes  If this production is commingled with that from any other lease or pool, give commingling order number IV. COMPLETION DATA  Designate Type of Completion — (X)  Date Spudded  Date Compl. Ready to Prod.  Total Depth  Tubing, CASING, AND CEMENTING RECORD  HOLE SIZE  CASING & TUBING, SIZE  DEPTH SET	om The East
Name of Authorized Transporter of Cili or Condensate Address (Give address to which Cities Service Oil Company  If well produces oil or liquids, qive location of tanks.  A 33 88 30E  Tes  If this production is commingled with that from any other lease or pool, give commingling order number IV. COMPLETION DATA  Designate Type of Completion — (X)  Date Spudded  Date Compl. Ready to Prod.  Total Depth  Tubing, CASING, AND CEMENTING RECORD  HOLE SIZE  CASING & TUBING, SIZE  DEPTH SET	Chaves County
Name of Authorized Transporter of Cil or Condensate Address (Give address to which Cities Service Oil Company  If well produces oil or liquids, qive location of tanks.  A 33 85 30E  If this production is commingled with that from any other lease or pool, give commingling order number IV. COMPLETION DATA  Designate Type of Completion — (X)  Date Spudded  Date Compl. Ready to Prod.  Elevations (DF, RKB, RT, GR, etc., Name of Producing Formation Top Oil/Gas Pay  TUBING, CASING, AND CEMENTING RECORD  HOLE SIZE  CASING & TUBING SIZE  DEPTH SET	UIAVES .
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Cities Service Oil Company  If well produces oil or liquids, give location of tanks.  If this production is commingled with that from any other lease or pool, give commingling order number IV. COMPLETION DATA  Designate Type of Completion — (X)  Date Spudded  Date Compl. Ready to Prod.  Elevations (DF, RKB, RT, GR, etc., Name of Producing Formation  Tubing, Casing, and Cementing Record  TUBING, Casing, and Cementing Record  TUBING Casing, and Cementing Record  Depth Set Depth Set	
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If this production is commingled with that from any other lease or pool, give commingling order number  IV. COMPLETION DATA  Designate Type of Completion — (X)  Date Spudded  Date Compl. Ready to Prod.  Elevations (DF, RKB, RT, GR, etc., Name of Producing Formation  Tubing, CASING, AND CEMENTING RECORD  HOLE SIZE  CASING & TUBING SIZE  DEPTH SET	When
Designate Type of Completion — (X)  Date Spudded  Date Compl. Ready to Prod.  Elevations (DF, RKB, RT, GR, etc., Name of Producing Formation  Tubing, Casing, and Cementing Record  HOLE SIZE  Casing & Tubing Size  Depth Set	August 28, 1968
Designate Type of Completion — (X)  Date Spudded  Date Compl. Ready to Prod.  Elevations (DF, RKB, RT, GR, etc., Name of Producing Formation  Tubing, Casing, and Cementing Record  HOLE SIZE  Casing & Tubing Size  Depth Set	
Designate Type of Completion — (X)  Date Spudded  Date Compl. Ready to Prod.  Elevations (DF, RKB, RT, GR, etc., Name of Producing Formation Top Oil/Gas Pay  Perforations  TUBING, CASING, AND CEMENTING RECORD  HOLE SIZE  CASING & TUBING SIZE  DEPTH SET	Plug Back   Same Res'v. Diff. Res'v.
Date Spudded  Date Compl. Ready to Prod.  Total Depth  Top Oil/Gas Pay  Perforations  TUBING, CASING, AND CEMENTING RECORD  HOLE SIZE  CASING & TUBING SIZE  DEPTH SET	Fing Back Same Nes V. Bitt. Ites V.
Elevations (DF, RKB, RT, GR, etc., Name of Producing Formation Top Oil/Gas Pay  Perforations  TUBING, CASING, AND CEMENTING RECORD  HOLE SIZE CASING & TUBING SIZE DEPTH SET	P.B.T.D.
Perforations  TUBING, CASING, AND CEMENTING RECORD  HOLE SIZE CASING & TUBING SIZE DEPTH SET	
Perforations  TUBING, CASING, AND CEMENTING RECORD  HOLE SIZE CASING & TUBING SIZE DEPTH SET	Tubing Depth
TUBING, CASING, AND CEMENTING RECORD  HOLE SIZE CASING & TUBING SIZE DEPTH SET	
TUBING, CASING, AND CEMENTING RECORD  HOLE SIZE CASING & TUBING SIZE DEPTH SET	Depth Casing Shoe
HOLE SIZE CASING & TUBING SIZE DEPTH SET	
	SACKS CEMENT
able for this densh on he for full 2d house)	
OII. WEIL  Date First New Oil Run To Tanks Date of Test Producing Method (Flow, pump,	
Date First New Oil Aun 10 I diags	i oil and must be equal to or exceed top allow-
Length of Test Tubing Pressure Casing Pressure	i oil and must be equal to or exceed top allow-
	i oil and must be equal to or exceed top allow-
Actual Prod. During Test Oil-Bbls. Water-Bbls.	i oil and must be equal to or exceed top allowas lift, etc.)
	i oil and must be equal to or exceed top allowas lift, etc.)
	i oil and must be equal to or exceed top allowas lift, etc.)  Choke Size
GAS WELL	i oil and must be equal to or exceed top allowas lift, etc.)  Choke Size
Actual Prod. Test-MCF/D Length of Test Bbls. Condensate/MMCF	i oil and must be equal to or exceed top allowas lift, etc.)  Choke Size

## VI. CERTIFICATE OF COMPLIANCE

Testing Method (pitot, back pr.)

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.

(Signature) Production Supervisor (Title)

August 30, 1968

(Date)

Tubing Pressure (Shut-in)

OIL CONSERVATION COMMISSION

Casing Pressure (Shut-in)

Choke Size

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.

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.