	*		
NO. OF COPIES RECEIVED			
DISTRIBUTION	NEW MEXICO OIL CONSERVATION COMMISS 1		Form C-104
SANTA FE	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-110 Effective 1-1-65
FILE		AND	Effective 1-1-05
u.s.g.s.	AUTHORIZATION TO TRA	NSPORT OIL AND NATURAL	GAS
LAND OFFICE			
TRANSPORTER GAS			
OPERATOR	The state of the s		
PRORATION OFFICE			
Operator			
	pache Corporation		
	Building, Midland, Texa		
Reason(s) for filing (Check proper box		Other (Please explain) R	equest temporary off-
New Well	Change in Transporter of:		permit for 90 days
Recompletion	Oil Dry Gas	Pending approve	al of permanent permit.
Change in Ownership	Casinghead Gas Conden	sate	
If change of ownership give name and address of previous owner			
	LEASE 74	A Dun	Bun. Ille
DESCRIPTION OF WELL AND Lease Name	Well No. Pool Nar	ne, Including Formation	Kind of Lease
High Plains Unit	1 Une	designated	State, Federal or Fee
Location			
Unit Letter A 66	Feet From The North Lin	e and 660 Feet Fro	om The <u>East</u>
Ollit Letter			
Line of Section 22 , To	wnship 148 Range	34E , NMPM,	Lea County
. DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL GA	S	proved copy of this form is to be sent)
Name of Authorized Transporter of Oi McWood Corporation	or Condensate	1	
1	·	2004 Wilco Building	proved copy of this form is to be sent)
Name of Authorized Transporter of Co	asinghead Gas or Dry Gas	Address (Give duaress to which up)	proper copy of the joint to the first street
	Unit Sec. Twp. Rge.	Is gas actually connected?	When
If well produces oil or liquids,	Unit Sec. Twp. Rge.  1 15 148 34E	No	
give location of tanks.		<u> </u>	
If this production is commingled w . COMPLETION DATA	ith that from any other lease or pool,	give comminging order number.	
	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Restv. Diff. Restv.
Designate Type of Completi	$\mathbf{X}$		
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
12-7-64	1-14-65	10,600'	10,563
Pool	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
Undesignated	bower Wolfeamp Penni	10,430'	10,340 1 Depth Casing Shoe
Perforations		10,511-12'	
10,438-39', 10,444-45	o', 10,449-50', 10,486-		10,600'
		D CEMENTING RECORD	CACKS CEMENT
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
	11 3/4"	365	325
11"	3 5/8"	4530	450
7 7/8"	4 1/2"	10,600	375
. TEST DATA AND REQUEST 1	FOR ALLOWABLE (Test must be a	after recovery of total volume of load epth or be for full 24 hours)	oil and must be equal to or exceed top allow
OIL WELL  Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, ga	s lift, etc.)
1-13-65	1-14-65	Flow	
	Tubing Pressure	Casing Pressure	Choke Size
Length of Test			1 /2 !!
12 hours	640	Packer Water-Bbls.	Gas-MCF
Actual Prod. During Test		n	3 500
531	631	l U	1,500
O A C WEY Y			
GAS WELL  Actual Dred Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Actual Prod. Test-MCF/D	Dength of Test		
The state of the s	Tubing Pressure	Casing Pressure	Choke Size
Testing Method (pitot, back pr.)	Tability Piessure		
		1 0000000	DVATION COMMISSION
I. CERTIFICATE OF COMPLIA	NCE	UIL CONSER	RVATION COMMISSION
		- 11	

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.

(Date)

$P_{\alpha}$	
J. S. Williams	
L. Milliami	
(Signature)	
(Signature) District Engineer	

**J**anuary 15, 1965

This form is to be filed in compliance with RULE 1104.

TITLE -

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 Sections I, II, III, and VI only 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.