		_							
HO. OF COPIES RECE	EIVEO	1							
DISTRIBUTION		NEWNEY	//CO OIL C	ONCEDVA	ATION COMM	SSION	.		
SANTA FÉ		1			ATION COMMI	331014	Form C-104 Supersedes (old C-104 and C-110	
FILE		- · · · · · · · · · · · · · · · · · · ·	CEMOESI		LOWABLE		Effective 1-1		
U.S.G.S.		AUTUODIZATIO	N TO TO (AND		LATUDAL	ું. c. c.		
LAND OFFICE		AUTHORIZATIO	NIOIKA	ANSPUK I	OIL AND N	IA TURAL (∌A 3		
LAND OFFICE	OIL	┥ .			• 1751	2 20	FH '67		
TRANSPORTER	GAS						5 ,		
OPERATOR PHORATION OFF	FICE					٨	MAY 1, 1970, STAI	VDARD OIL	
Operator Standan		any of Texas					OMPANY OF TEXA		
A Divis	ion of Chev	vron Oil Company					HEVRON OIL CON	APANY,	
Address 3610 Av Snyder,	renue S Texas 7954	49							
Reason(s) for filing (Other (Please	explain)	and wall	numban dua	
New Well		Change in Transporter	of:	_			name and well	Humber age	
Recompletion		Oil	Dry Ga	ıs 🔙	to uniti	zation.			
Change in Ownership	P	Casinghead Gas	Conder	nsate	9-		73 9.1	#= ·-	
				<u></u> _		rmerly:	Hes Federal	#17	
If change of owners and address of prev									
DESCRIPTION O	F WELL AND	LEASE			•				
Lease Name		Well No. Pool Name,				Kind of Leas		Lease No.	
Maljamar (Gra	ayburg) Uni	t 25 Maljama	r (Gray	burg-Sa	an Andres	State, Federa	lorFee Federal	NM 03.15712	
Location Unit Letter	м <u>; 66с</u>	Feet From The SC	outh_Lin	ıe αnd	990	Feet From '	The <u>West</u>		
Line of Section		wnship 17S		32E	, NMPM,	Tas		County	
Cine of Section	4 .0	Τ.μ.		- 3 611					
DESIGNATION OF	F TRANSPOR	TER OF OIL AND NAT		<u> </u>					
Name of Authorized Texas New Mex				P.O. 1	Box 1510,	Midland			
'Name of Authorized'			Gas 🗀	1			ved copy of this form is	to be sent)	
Phillips Peta	roleum Comp	any		!	Box 6666,		Texas		
If well produces oil o give location of tank		Unit Sec. Twp. J 17S	Rge. 32E	Yes	tually connecte	d? Wh	en		
		th that from any other leas	se or pool,	give com	ningling order	number:			
COMPLETION DA		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back Same R	es'v. Diff. Res'v.	
Designate Typ	e of Completion	on – (X)		<u> </u>	<u>.</u>	<u> </u>			
Date Spudded		Date Compl. Ready to Prod	i.	Total De	pth .		P.B.T.D.		
Elevations (DF, RKE	3, RT, GR, etc.)	Name of Producing Format	ion	Top Oil/	Gas Pay		Tubing Depth		
Perforations						Depth Casing Shoe			
						_			
				CEMEN.	TING RECOR				
HOLE	SIZE	CASING & TUBING	SIZE		DEPTH SE	T	SACKS CE	MENT	
									
				<u> </u>			 		
				<u> </u>			<u>.l</u>		
	D REQUEST F				ry of total volui or full 24 hours		and must be equal to o	exceed top allow-	
OIL WELL Date First New Oil F	Run To Tanks			Producing Method (Flow, pump, gas life			ft, etc.)		
Length of Test		Tubing Pressure		Casing Pressure			Choke Size		
		OU DVI		Water Phia			Gas - MCF		
Actual Prod. During Test		Oil-Bble.		Water-Bbls.					
		<u> </u>							
GAS WELL	V05.65	I anoth of Tost		Bble Co	ndensate/MMCf		Gravity of Condensa		
Actual Prod. Test-N	MCF/D	Length of Test		1 2018. CO			G. C. T. T. O. Condensa	-	
Testing Method (nite	ot back nr. l	Tubing Pressure (Shut-is	2	Casing F	ressure (Shut-	-in)	Choke Size		

VI. CERTIFICATE OF COMPLIANCE

1.

II.

III.

IV.

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given the last true and complete to the best of my knowledge and belief.

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SW.	McCa	CA ents	uls							
				(Sig	rature)					
Dictori	c+ F	=n~i	noor							

District Engineer (Title)

April 28, 1967 (Date) OH CONSERVATION COMMISSION

APPROVE

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 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.