NO. OF COPIES RECEIVED							
DISTRIBUTIO							
SANTA FE							
FILE							
U.S.G.S.							
LAND OFFICE							
TRANSPORTER	OIL						
	GAS						
OPERATOR							
PROBATION OF							

## REQUEST FOR ALLOWABLE C. C. C.

Form C-104 Supersedes Old C-104 and C-110
Effective 1-1-65

	FILE						AND			Litective	1-1-03	
	U.S.G.S.		AU	THORI	ZATION	TO TRA	ANSPURIT	POIL PENSTH	TURAL (	GAS		
	LAND OFFICE							- 4 15. 21k	116/			
	OIL											
	TRANSPORTER GAS											
	OPERATOR		1							ALAV 1 1070		
	PRORATION OFFICE								MM1 1, 1970	MAY 1, 1970, STANDARD ON		
1.												
	Standard Cil Company of Texas - A Division of Chevron Oil Company Of Texas - A Division of Chevron Oil Company											
		Standard C11 Company of Texas " A Division of Chevion of Standard CHEVRON OIL COMPANY.										
	_		Clare and	Z	Marra a							
	3610 Aven			ier,	Texas		<sub>1</sub>	Other (Please ex	enlain)			
	Reason(s) for filing (Check p	roper oox,						,			_	
	New Well		Change in Transporter of: Change in battery location effective									
	Recompletion Oil Dry Gas 6-29-67.											
	Change in Ownership		Casi	nghead (	Gas	Conde	nsate					
	•											
	If change of ownership give and address of previous ow											
II.	DESCRIPTION OF WEL	L AND	LEASE									
	Lease Name		Well		ool Name, In			١.	ind of Leas		Lease No.	
	Maljamar (Graybur	g) Uni	.t   :	1.8	Maljama	r (Gra	ayburg	San Andres	ate, Federa	alor Fee <b>Feder</b>	aj. <b>Im 0</b> 1679 <b>9</b>	
	Location	<del></del>										
	Unit Letter H	, 198	ko	_	Mon	<b>.</b>		660		The East		
	Unit Letter 12	:	Fee_	t From T	The NOT	<u>'th</u> Lii	ne and	000	Feet From	The AMOU		
	,	_			_		201	N7 470 4	7.	_	County	
	Line of Section 4	Tov	wnship	178	R	lange	32E	, NMPM,	<u>Le</u>	<u>a                                     </u>	County	
III.	DESIGNATION OF TRA					RAL GA	48	(C: dd +	uhinh anns	oved copy of this form	ie to he sent!	
	Name of Authorized Transpo	rter of Oil	X	or Cond	lensate		Address	Give dadress to	шинен шрргс	near copy of title form	i is to be sent;	
	Texas New Mexico	Pipeli	ne				P. 0	P. O. Box 1510, Midland, Texas				
	Name of Authorized Transpo	rter of Cas	singhead G	as X	or Dry Ga	s	Address (Give address to which approved copy of this form is to be sent)					
	Phillips Petroleu	m Com	anv				P. O. Box 6666, Odessa, Toxas					
	If well produces oil or liquid		Unit	Sec.	Twp.	Rge.		tually connected		nen		
	give location of tanks.	.5,	J	14	178	32E		Yes	!			
	<u> </u>			<del></del>		<del>1 -</del>						
	If this production is commi	ngled wi	th that fro	m any o	other lease	or pool,	give com	ningling order n	umber:	<u> </u>		
IV.	COMPLETION DATA			Oil	Well G	as Well	New Well	Workover	Deepen	Plug Back Same	Res'v. Diff. Res'v.	
	Designate Type of C	ompletio	on - (X)	, 011	.,		1	1	<b>:</b>	+	1	
		r		<u> </u>			<del> </del>			P.B.T.D.	ii	
	Date Spudded		Date Con	npl. Rea	dy to Prod.		Total De	ptn		P.B.1.D.		
	Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation				Top Oil/	Gas Pay		Tubing Depth				
	Perforations				Depth Casing Shoe			e				
				TUE	BING, CAS	ING, AN	D CEMENTING RECORD					
	HOLE SIZE	CA	CASING & TUBING SIZE			DEPTH SET		SACKS CEMENT				
	HOLE SIZE											
			<del> </del>									
			+							+		
			<del> </del>							<del></del>		
			<u> </u>									
V.	TEST DATA AND REQ	UEST F	OR ALL	OWABI	LE (Test	must be	after recove	ry of total volume	of load oil	land must be equal t	o or exceed top allow-	
	OIL WELL		<del></del>		able	jor this a		or full 24 hours) g Method (Flow,		PA		
	Date First New Oil Run To Tanks Date of Test				Producin	g Method (riow,	pump, gas i	ujt, etc./				
						Choke Size						
	Length of Test		Tubing F	ressure			Casing F	Pressure		Choke Size		
										_		
	Actual Prod. During Test		Oil-Bbl	3.			Water - B	bls.	· · · · · · · · · · · · · · · · · · ·	Gas - MCF		
	_											
			<del></del>									
	GAS WELL											
	Actual Prod. Test-MCF/D		Length of Test				Bbls. Co	ndensate/MMCF		Gravity of Conde	nsate	
	Actual Prod. 18812 MCF/D					22.00 00.00.00.00.00.00						
					<del></del>			t chub	-1	Choke Size		
	Testing Method (pitot, back	pr.)	Tubing F	ressure	(Shut-in)	,	Casing F	ressure (Shut-i	<i>j</i>	CHOKO SIZO		
VI	CERTIFICATE OF COMPLIANCE				OIL C	ONSERV	ATION COMMIS	SION				
	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.							**				
					APPR	APPROVED , 19,						
					ا ا	5V						
					BY_							
								_				
	GUMACK!						TITLE					
	ZWIII PAIN	15					Т	his form is to b	e filed in	compliance with	RULE 1104.	
	E. W. McCants						7.6	this is a reque	st for allo	wable for a newly	drilled or deepened	
							If this is a request for allowable for a newly drilled or deepened					

(Signature)

District Engineer

June 28, 1967

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.