NO. OF COPIES REC	EIVED	İ _	
DISTRIBUTION			
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
		7	

## NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE

Form C-104 Supersedes Old C-104 and C-110

	FILE	1	AND	Effective 1-1-65		
	U.S.G.S.	AUTHORIZATION TO TRA	NSPORT OIL AND NATURAL	GAS		
	LAND OFFICE					
	TRANSPORTER OIL					
	GAS	+				
_	OPERATOR PROPATION OFFICE	4				
I.	Operator					
	Chevron U.S.	A. Inc.				
	Address					
	P. O. Box 166		9701			
	Reason(s) for filing (Check proper box)		Other (Please explain)			
	New Well Recompletion	Change in Transporter of: Oil Dry Ga				
	Change in Ownership	Casinghead Gas Conden	<b>F</b>			
			<del></del>			
	If change of ownership give name and address of previous owner	Chevron Oil Company, P.	O. Box 1660, Midland,	Texas 79701		
			-			
II.	DESCRIPTION OF WELL AND	Well No. Pool Name, Including Fo	ormation   Kind of Lea	se Lease 1	No.	
		!	burg-San Andres State, Feder	1 =		
	Maljamar (Grayburg) Uni	C II PELJEMEN (GIAV	ourg-ban Andresy	Federal MM-OLO	122	
	Unit Letter G : 198	O Feet From The North Lin	e and 1980 Feet From	The East		
	Onit Letter;;	- reet i tom The	1 001 1 101			
	Line of Section 4 Tov	waship 17-South Range 32	-East , NMPM, Lea	Cour	ıty	
III.	Name of Authorized Transporter of Oil	TER OF OIL AND NATURAL GA	Address (Give address to which appr	oved copy of this form is to be sent)		
	Texas-New Mexico Pipeli	<del></del>				
	Name of Authorized Transporter of Cas		P. O. Box 1510, Midle Address (Give address to which appr	oved copy of this form is to be sent)		
	Phillips Petroleum Comp	- <del></del>	P. O. Box 6666, Odess	_		
	If well produces oil or liquids,	Unit Sec. Twp. Rge.		hen		
	give location of tanks.	J 4 17-S 32-E	Yes			
	If this production is commingled with	th that from any other lease or pool,	give commingling order number:			
IV.	COMPLETION DATA	Cil Well Gas Well	New Well Workover Deepen	Plug Back   Same Res'v. Diff. Re	es'v.	
	Designate Type of Completic		New Well Holkever   Beepen	i lag Back Came ites w		
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth		
	Perforations			Depth Casing Shoe		
		TURNIC CASING AND	CEMENTING BECORD			
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
	HOLE SIZE	CASING & FORING SIZE	52.11.55			
			L	<u>i</u>		
V.	TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a	fter recovery of total volume of load of	l and must be equal to or exceed top a	llow-	
	OIL WELL  able for this depth or be for full 24 hours)  Date First New Oil Run To Tanks  Date of Test  Producing Method (Flow, pump, gas lift, etc.)					
	Edie Filst New Oll Hair To Faile					
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size		
	Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas - MCF		
	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate		
	Actual Float 1001-Mol/D		, , , , , , , , , , , , , , , , , , , ,			
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size		
VI.	CERTIFICATE OF COMPLIAN	CE	OIL CONSERV	ATION COMMISSION		
			MAD 1 -	1977, 19		
	I hereby certify that the rules and	regulations of the Oil Conservation	APPROVED MARK	19		
Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		BYOrig. Signed by  Jerry Sected  TITLEDiet 1, Supy.				
	H. Jande	ll -		compliance with RULE 1104.		
		ature)		owable for a newly drilled or deep canied by a tabulation of the device	ation	
	W. A. Goudeáti (Sign	······	tests taken on the well in acc	ordence with RULE 111.		

(Title)

February 28, 1977 (Date)

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.