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1	SANTA FE			
- 1	FILE			
	U.S.G.S.			
	LAND OFFICE			
	TRANSPORTER	OIL		
		GAS		
	OPERATOR			
1.	PRORATION OFFICE			
,				

June 28, 1967

(Date)

NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR MULDOWARE FOR A

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

FILE	KEQUEST I	AND	Effective 1-1-65		
U.S.G.S.	AUTHORIZATION TO TRAN	SPARTZOIL MAD NATHRAL G	AS		
LAND OFFICE		OUN EU 12 57 FM 67			
TRANSPORTER OIL					
GAS					
	MAY 1, 1970, ST				
PRORATION OFFICE Operator		INIC	PANY OF TEXAS IS CHANG- ITS OPERATING NAME TO		
Standard Oil Company of	Texas - A Division of		RON OIL COMPANY.		
Address					
3610 Avenue S - Snyder		Other (Please explain)			
Reason(s) for filing (Check proper box)	Change in Transporter of:	Office (1 tease explain)			
New Well Recompletion	Oil Dry Gas	Change in batt	ery location		
Change in Ownership	Casinghead Gas Condens				
If change of ownership give name and address of previous owner					
DESCRIPTION OF WELL AND I	Well No. Pool Name, Including For	mation Kind of Lease	Lease No.		
Maljamar (Grayburg) Uni			or Fee Federal NM 0167		
Location					
Unit Letter G : 198 0	Feet From The North Line	and 1980 Feet From T	The East		
omi Letter		_	County		
Line of Section 4 Tow	mship 178 Range	32E , NMPM, Lea	County		
	ODD OF OH AND NATURAL CAS	•			
Name of Authorized Transporter of Oil	rer of oil and natural gas or Condensate	Address (Give address to which approx	ed copy of this form is to be sent)		
Texas New Mexico Pipeli	I	P. O. Box 1510, Mislan Address (Give address to which approx	nd, Texas		
Name of Authorized Transporter of Cas	singhead Gas 📉 or Dry Gas 🗔				
Phillips Petroleum Comp		P. O. Box 6666, Odessi			
If well produces oil or liquids,	Unit Sec. Twp. Age.	Is gas actually connected? Who	en .		
give location of tanks.	J 4 178 32E	Yes			
If this production is commingled wit	th that from any other lease or pool, g	give commingling order number:			
. COMPLETION DATA	Cil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res		
Designate Type of Completion	on - (X)				
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
			Tubing Depth		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth		
			Depth Casing Shoe		
Perforations					
	TUBING, CASING, AND	CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
11022 3.12					
		i fter recovery of total volume of load oil	and must be equal to or exceed top all		
. TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a able for this de	pth or be for full 24 hours)			
OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas l	ift, etc.)		
Length of Test	Tubing Pressure	Casing Pressure	Choke Size		
		Water - Bbls.	Gas - MCF		
Actual Prod. During Test	Oil-Bbls.	Adiat - Phia.			
	<u> </u>	<u></u>			
CAS WELL					
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate		
			Choke Size		
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size		
			A THOM COMMISSION		
I. CERTIFICATE OF COMPLIAN	NCE	OIL CONSERV	ATION COMMISSION		
		APPROVED , 19			
	regulations of the Oil Conservation with and that the information given				
above is true and complete to the	Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		TITLE This form is to be filed in compliance with RULE 1104.		
Sam to					
good caus		for allowable for a newly drilled or deepe			
E. W. McCants (Signature)		If this is a remiestric error	well, this form must be accompanied by a tabulation of the deviat tests taken on the well in accordance with RULE 111.		
/ /51#	nature)				
District Engineer	nature)	well, this form must be accome	ordence with RULE 111.		

able 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.