			,	···				***				
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DISTRIBUTION		NEW MEXICO OIL CONSERVATION COMMISSION Form C-10							Form C-104			
SANTA FE			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			OP ALLOWARIE			Supersedes Old C-104 and C-110			
FILE						AND	:	U.C		Effective 1-1-6	5	
U.S.G.S.			AUTH	ORIZAT	ION TO TRA	NSPORT	OIL AND N	IATURAL	GAS			
LAND OFFICE					ION TO TRA	há	7 1 2 c	5 M'b	1			
IRANSPORTER	OIL GAS			•					MAY 1, 1	1970, STAND NY OF TEXAS	ARD OIL IS CHANGE	
OPERATOR PRORATION OFF	ICE		<u> </u>					<u></u>	COMPAT	OPERATING ON OIL COM	NAME TO	
Operator Standard	d Oil	Compa	ny of Te	xas	_				CHEVRO	M OIL COM	•	
A Divisi Address 3610 Ave Snyder,	22110	₹ .	ron Oil	Compan	Y							
Reason(s) for filing (	Check p	roper box	,				Other (Please	explain)		م المبدلم	umban dua	
New Well				in Transpo	rter of:		Change of lease I			name and well number due		
Recompletion		Oll Dry Ga			ıs 🔛	to unitization. Formerly: Ile			s Federal #3			
Change in Ownership			Casingh	ead Gas	Conde	nsate						
If change of ownershand address of previ	ious ow	ner	I FACE						ç			
DESCRIPTION OF Lease Name	r WEL	LAND	Well No		me, Including F			Kind of Led			Lease No.	
Maljamar (Gra	yburg				mar (Gray			State, Fede	ral or Fee		IC 059576	
Unit Letter	<u>A</u>	;66	Feet F	om The	North Lin	ne and	660	_ Feet From	n The	East		
Line of Section	10	Tov	wnship	178	Range	32E	, NMPM,	, Lea	· - ···		County	
DESIGNATION OF	Franspor	ter of Oil	Or or	Condensat		Address (	Give address to Box 1510,			of this form is t	o be sent)	
Texas New Mex		-		Z) 07 D	ry Gas					of this form is t	o be sent)	
Name of Authorized T Phillips Petr		any			P.O. Box 6666, Odessa,							
If well produces oil o give location of tanks	3, 	Unit Se	1	vp.   Rge. 17S   32E	Yes	· · · · · · · · · · · · · · · · · · ·						
If this production is COMPLETION DA		ngled wi	th that from a						Plug B	ack   Same Box	stv. Diff. Restv.	
Designate Type of Completion			on = (X)	Oil Well	Gas Well	New Well	Workover	Deepen	l l	dek Same Nes	1	
Date Spudded			Date Compl.	Ready to	Prod.	Total De	oth		P.B.T.	D.		
	·		ļ	\		Ton 00 (	Gas Day		Tubing	Depth		
Elevations (DF, RKB, RT, GR, etc.)			Name of Producing Formation			Top Oil/Gas Pay				Depth Casing Shoe		
Perforations									Deptil	Sasmy Shoo		
				TUBING	CASING, AN	D CEMEN	TING RECOR	D	<del></del>			
HOLE	517F		CASIN		ING SIZE		DEPTH SE			SACKS CEN	MENT	
7,022	3,20											
			•									
TEST DATA AND OIL WELL	REQU	JEST F	OR ALLOW	ABLE	(Test must be a able for this de	epth or be so	or full 24 hours	)		be equal to or	exceed top allow	
Date First New Oil F	lun To T	'anks	Date of Tes	t.		Producin	g Method (Flou	, pump, gaz	tift, etc./			
Length of Test To			Tubing Pres	Tubing Pressure			Casing Pressure			Choke Size		
Actual Prod. During Test			Oil-Bbls.	Oil-Bble.			Water - Bbls.			Gas-MCF		
						<u>. I</u>	·	<del></del>			·	
GAS WELL Actual Prod. Test-MCF/D			Length of Test			Bbls. Co	Bbls. Condensate/MMCF			Gravity of Condensate		
Testing Method (pitot, back pr.)			Tubing Pres	Tubing Pressure (Shut-in)			Casing Pressure (Shut-in)			Choke Size		
CERTIFICATE OF COMPLIANCE							OIL CONSERVATION COMMISSION					

TITLE .

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.

(Signature)

(Title)

(Date)

District Engineer

April 28, 1967

I.

II.

III.

IV.

VI.

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 acctions of this form must be filled out completely for allowable on new and recompleted wells.

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

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.